

HYPNOTHERAPY TODAY

ASSOCIATION FOR SOLUTION FOCUSED HYPNOTHERAPY JOURNAL ISSUE 14

IN BUSINESS SOLUTION FOCUS - NOT JUST IN A CLINIC ROOM

Including:

How to change everything by changing as little as possible

Setting up a clinic

In practice with Matthew Dyson

How stage hypnosis can help therapy

A FOND FAREWELL

After four years at the front line of the Association, Debbie Pearce and Sharon Dyke have made the very difficult decision to stand down from their lead roles within the AfSFH.

Sharon and Debbie told us: We have been re-evaluating our current work load, and we both feel that our future lies with developing CPHT Guildford, and the SFH conversion course for CPHT, of course we like to think we can do it all but when it came down to it we had to prioritise, and consequently we felt that now might be a good time to seek our replacement.

The AfSFH has enabled us to grow both personally and professionally and we are very grateful to David Newton for giving us the opportunity to be so involved, it has been an amazing journey.

Many of you will know the amount of work that has gone into setting up the organisation and we cant thank everyone enough for all your support.

Over the years many people have been involved at different levels and the commitment and dedication has been second to none, we are very proud to have worked along side our members and the executive committee, we want to remind

everyone how you have all been instrumental in the development that has led us to becoming a member of UKCHO and the CNHC and what an amazing feat that was in such a short period of time.

Our aim has always been to ensure our members have the best Organisation available to them that they felt was professional and effective and we didn't want to leave until we found a new leader with the same values.

With David Newton on the case this didn't take long and we would like you all to join us in welcoming David Mclean as the new CEO of the AfSFH.

David has been a member of the Executive team for some time and seemed the obvious choice to take the Association forward into the next phase, we both wish him well on his journey and know that he will offer the same level of commitment that we hope we did for our members.

So farewell and good luck and I'm sure we will see many of you in the future at CPHT ■

Sharon Dyke and Debbie Pearce

A NOTE FROM THE NEW CEO

First of all, I would like to take this moment to formally thank Sharon, our previous CEO and Debbie, the Operations Director for all the fantastic work they have done in taking our association forward. They have both been involved from the inception and with their conscientious attitude and dedication throughout, our association has benefited enormously thus far.

I would also like to take this time to thank David and the trustees for granting me this opportunity to take on this fantastic role, one in which I am very much looking forward to develop into the future.

Our association is in a fantastic place at the moment and much of this is down to the continued individual professionalism and support we gain

from it's members. We value your opinion and strive to meet your needs as solution focused hypnotherapy practitioners. We now have solid foundations that we can continue to build upon.

Our vision for the future is to continue to grow as an organisation, spread awareness and the benefits of solution focused hypnotherapy, while still keeping to our high standards. This is my challenge to take forward. With our new additions to the senior management team within marketing, research and membership, not forgetting the wealth of experience that is already with us, it really is a great time to be involved. This is exciting times for our association and something that I feel extremely privileged to be part of ■

David Mclean

LETTER FROM THE EDITOR

Welcome to the October 2014 edition of Hypnotherapy Today. There have been a few changes in the executive committee, so it's a fond farwell and best of luck to Debbie and Sharon,, who have put so much energy in getting us to where we are today, and welcome David Mcleanas CEO, Duncan Little, Tiffany Armitage and Denis Counce into the fold. This edition focuses on business and how our skills can be put to good use, not just in a clinic room. We have an excellent article from Mark McKergow giving us some case studies at SFwork, Malcolm Droy on retreats, Nicola Green with setting up not just a practice but a whole clinic, and Stuart Taylor (I've had the pleasure of being his assistant once and it was amazing) on stage hypnosis. Clare Hancock utilizes a writing group to provide a range of metaphors, and Duncan Little shares his experience of media, plus much much more ■

If you have any contributions or comments to make, please email me at:- journal@afsfh.com

Penny
Penny Ling, Editor



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Stuff:

Thanks to my proof reading team. The Journal of the Association for Solution Focused Hypnotherapy established 2010 represents the practice of solution focused hypnotherapists as a distinct profession in its own right. Membership is open to those practitioners who have the appropriate qualifications and experience within the field.

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SOLUTIONS FOCUS

HOW TO CHANGE EVERYTHING BY CHANGING AS LITTLE AS POSSIBLE

By Dr Mark McKergow - Co-director, sfwork
- The Centre for Solutions Focus at Work

Problem Focus	Solutions Focus
What's wrong	Definitions
What needs fixing	What's wanted
Blame	What's working
Control	Progress
Causes in the past	Influence
The expert knows best	'Counters' in the past
Deficits & weaknesses	Collaboration
Complications	Resources & strengths
	Simplicity
	Actions

(from Jackson and McKergow, 2007)

It's common knowledge in the business world that change is very difficult. Managing change is hard work, creating change takes lots of effort, top management support is vital and yet elusive, and great care has to be taken to make sure it all doesn't go horribly wrong. At least so it is said...

Would it surprise you to know that a new approach to change is gathering momentum fast in the business and organisational world? Solutions Focus (SF) comes originally from the world of mental health and psychological change, where it is transforming our understanding of people and how they work. It's also making inroads in business all over the world - global names including Nationwide Building Society (UK), Royal Bank of Canada, Lufthansa (Germany) and Canon (Japan) are benefiting right now.

At sfwork we are taking a leading role in spreading SF throughout the business world. Within the UK we have users in organisations from household names in the oil industry, the BBC, through smaller companies down to specialist change consultancies who use the approach with their clients.

Problem Focus and Solutions Focus

Are there times when you want something to be different, and just don't know what to do? Of course there are. So rather than embark on that expensive

change programme, why not investigate this approach - it's fast, effective, energising, engaging, flexible, low cost...and somewhat counter-intuitive.

Here's a thought to begin with - one definition of SF:

Change is happening all the time... The simple way to change is to find useful change and amplify it.

When something's wrong, we have the idea that the way to change is to find what's wrong and fix it. The usual strategy goes something like this:

1. Diagnose the problem
2. Discover the cause and address weaknesses
3. Make detailed action plans

This works very well in many situations - fixing your car, for example. You take it to the garage and you want them to look at it, find what's wrong, fix it and give it back to you. This strategy works well for situations where things are fixed and well-known in advance, and where your efforts don't themselves change the situation dramatically.

Introduce people into the equation, however, and things aren't so easy. For decades psychologists have been trying to find ways to classify people and their problems so that the basic 'problem-focused' strategy will work. The results have been less than startling. However, the good news is that there is a better way - a way which not only works reliably but also saves a great deal of time and effort on everyone's

part. We know it as Solutions Focus.

SF takes a quite different approach to working out what to do. To start with, it doesn't use ANY of the conventional problem-focused steps above. Wait a moment... how on earth can you make progress without knowing exactly what the problem is? Surely we have to address the underlying causes if we want lasting success? The fifty years of experience, development, research and practice into the SF approach shows differently.

SF - the direct route

So, what are we going to do instead? Rather than the problem-focused route described above, we can look at SF as taking three contrasting steps:

1. Describe what's wanted instead
2. Discover what's working already and find strengths
3. Take small steps

At first glance this looks so obvious it's hardly worth talking about. And yet the process of discussing, deciding and acting on these things - and not doing the other things - can transform even the most difficult situation. Professionals who work in the most challenging situations - top executives, consultants, psychiatrists, teachers, change agents - are all discovering the simple power of SF.

The reasons for this become clearer when we have a look at the contrast between working with a problem focus and a solutions focus.

An example - An Inspector Calls

The chemical site had a problem, and it was looming larger - with a threat of closure from a new safety inspector. The plant had seen plenty of change over the years, with old machinery decommissioned and new processes brought on stream. Safety, which had always been a key issue, was now managed by a plant safety team in conjunction with the safety regulator's site inspector.

The inspector had a great deal of power - he could go wherever he wanted on site, enforce improvement notices (potentially at great expense), and ultimately could stop operations and close down the plant. In the past, working relations with successive inspectors had been reasonable. But now the new inspector was proving uncooperative when presented with the plant team's latest plans to improve the site's safety culture. The team members had been expecting support from the regulator, and were surprised by his officious attitude: he wanted to see every piece of paper and was reluctant to engage in the customary informal exchanges with managers.

The team tried all their regular good tactics for getting along, but to no avail. As stories spread - "You can't get a straight answer out of him..." "He's not interested in anything except the paperwork..." "He's out of his depth, you know..." "He won't stop till he's found something wrong." - a sense of despondency gripped the site.

The safety team knew the essence of the problem: the inspector was stopping them from making progress with their safety culture plans and a worsening impasse would threaten the very future of the site, with appalling knock-on effects for their parent company.

Traditional problem-focused ways of approaching the situation might include:

1. An examination of why the inspector wouldn't see sense
2. A 'barrier analysis' of what was impeding matters
3. A psychological profile of the inspector, to establish the cause of his behaviour
4. Attacking the inspector by official complaints to his seniors
5. A workshop with the inspector to firm up the nature of his concerns

You will notice that our role in this case was mostly in asking great questions, gently keeping the people on the SF track and away from the problem track, and helping them build on and expand their awareness and knowledge of the situation. The SF approach has parallels in the work of philosopher Ludwig Wittgenstein, who wrote:

"We learn by rearranging what we know" - Ludwig Wittgenstein

This might be one way to think about working in an SF way. By helping those around you rearrange what they - and you - know about the situation, then whatever needs to happen next becomes clearer. You have stripped away the confusion and muddle, and arrived at a more useful

6. Writing off the time and money invested in the safety culture project and starting again

The safety team brought us in to help, perhaps suspecting that we would begin by setting up a mediation between them and the inspector. Instead, we took a solutions focus, asking them to rate their encounters with him on a scale of 0 - 10. One manager quickly snorted - "Zero!". We paused and waited. "...apart from once, when it was a three for 20 seconds..."

Suddenly there was a glimmer of hope. The crux of the solution, we figured, would be in those few seconds. Not in any of the traditional approaches, and not even requiring conscious action from the inspector. The solution was not going to centre on him as an individual, with all his "flaws, failings and difficulties", but on the interactions between him and the safety team. We needed to know more.

When we asked the manager what he had done to bring about this dramatic, if brief, improvement, he said "I suppose I stopped pushing him for a moment and gave him time to think."

The mood of the meeting palpably changed. The team outlined the parts they had individually played in their own best exchanges with the inspector, and from these strands drew out a list of 14 actions that they could do quickly, simply and cheaply to move just one point up the scale.

These included bringing fewer people to meet the inspector, wearing name badges at meetings and giving him more notice of impending questions and issues. The individual who had most contact with the inspector was tasked with noticing what was working best.

Instead of gloom at their lack of options, the managers said they now felt refreshed to be analysing what was going well instead of what was going badly. When we followed up some weeks later, matters were much improved. The threat of an improvement notice had been lifted, and the project was back on track. One manager said that she knew they were making real progress when the 'impersonal' inspector had enquired about her recent holiday!

(from Jackson and McKergow, 2007)

understanding. And imagine being able to do that quickly and effectively - in a meeting, running a project, dealing with a difficult person, in a negotiation, building business strategy...

So let's look more closely at how to do it. Understanding SF - The Albert Model

Continued over...

I named this model after Albert Einstein, who once commented very sagely that

“Things should be made as simple as possible - but no simpler” Albert Einstein

It's the last three words that make this difficult, of course. Anyone can simplify something by leaving stuff out. You could simplify a motor car considerably by leaving out the engine. However, that would be too simple - it wouldn't work! The challenge is to simplify whilst leaving the process effective. This diagram gives us some clues about what to leave in and what to overlook and leave out.

In the diagram below, time runs from left to right. The present is in the middle, with past and future either side. You will notice a problem axis - running top left to bottom right. There's a problem we want to work on, and it started some time ago - so the problem and its causes lie in the past (top left). Here also are the weaknesses which may be contributing to the problem. There is a matching 'dreaded future' bottom right - the place we'll end up if the problem goes unchecked and unresolved. That's the problem axis.

The solution axis is quite different. The 'future perfect' - our term for what is wanted - is top right. Aligned with it bottom left is the solution-focused past - evidence of what's wanted happening already in various ways, and of related strengths and resources. This is the part of the diagram

“THINGS SHOULD BE MADE AS SIMPLE AS POSSIBLE - BUT NO SIMPLER”
ALBERT EINSTEIN

that is usually overlooked and ignored - and yet it contains the most useful and relevant information! Often, of course, people in difficult situations assume that they will draw a blank by looking here. One of the skills of using the SF approach is to gently and relentlessly probe to uncover the useful nuggets in this area.

People usually assume that the problem axis has to be investigated and understood before progress can be made. However, in

complex situations we find the opposite is the case: studying the problem and its causes is unhelpful in all kinds of ways. It makes you an expert in the problem - when what you want to be is an expert in how to do something else! And it tends to promote discussions of blame and demotivation, just at the moment when you want collaboration and engagement. And it takes up time you could be using more usefully.

Let's look at the four main contrasts of the Albert Model in more detail.

- What is wanted vs What's wrong
- What's working vs Why things are wrong
- Strengths vs Weaknesses
- Small steps vs Action plans

What is wanted vs What's wrong

When you go to the supermarket, you go with a list of what you want. It helps keep your shopping trip on track, and you come back with the right things. Situation normal. You wouldn't go shopping with a list of the things you didn't want... would you? Think about it; it would be a very long list indeed. And trying to work out, from looking at this list of thousands of items, what you did want would be a nightmare. And yet... this is precisely the problem-focused approach!

In the SF approach we have an unique and interesting way to compile our 'shopping list' - we call it Future Perfect.

Suppose... that you wake up tomorrow and suddenly and miraculously, everything is working the way you want...what would be the first tiny signs that would tell you? Who else would notice? What would they notice? What else? And so on.

Notice that this is not really goal setting in the usual sense. Here, we are imagining

a day when it's happened - the tiny details, the impact on everyone around us, the signs by which we discover it. These are usually small and everyday - even if the change has been dramatic and life-changing. Taking time working out what you want is rarely time wasted.. as long as you take it forwards to the next stage.

What's working vs Why things are wrong

Having described our Future Perfect - the signs of the things we want to happen - we can now move on to make connections with what's already working. You might think that the answer to what's working would be 'Nothing, dummy... that's why it's a problem!'. This is very rarely the case.

One practical SF tool to do this is the Scaling tool. It's deceptively simple.

Imagine a scale from 1-10, where 10 is the Future Perfect and 1 is the exact opposite. Where are you right now on that scale?

The answer to this is rarely zero - it might be, say, a three. So how come it's three already? What's already working? What else? What else? We can build up a list of elements that are already happening - perhaps a little, perhaps some of the time. Occasionally we find startling examples where nearly the whole Future Perfect happens already - but the connection has never before been made. Here's one such example below.

Strengths vs Weaknesses

Many organisations I know have personal development plans for their employees. These plans usually feature two lists of personal qualities: strengths (which are good) and 'areas for development' (which need developing). Of course, everyone knows that 'areas for development' is a polite way of saying 'weaknesses'. There seems to be the idea that if only we could develop our weaknesses, everyone would be a fine, balanced and excellent human being.

Only it's not like that at all. What makes people great contributors to the success of an organisation? Why, it's their strengths! So, how would it be if we asked people to develop and build further on... their strengths. World class performers are world class precisely because they excel at their strengths. Tiger Woods is surely the finest golfer in the world. I also hear that he is not a particularly good cook. But guess what - it doesn't matter! This applies to golf as well - Butch Harmon, who coached Tiger for many years, once suggested to Tiger that he practise his bunker shots. "No, Butch", replied Tiger. "I need to practise my approach shots - that way I won't get into the bunker in the first place."

People often ask me if this means we never need to address weaknesses. Of course not. If someone is messing up at their job, and

they need to keep doing it, then something has to be done. However, this is damage limitation rather than development. You might also ask how the individual managed to get the job in the first place and address recruitment procedures. But real development means building on strengths.

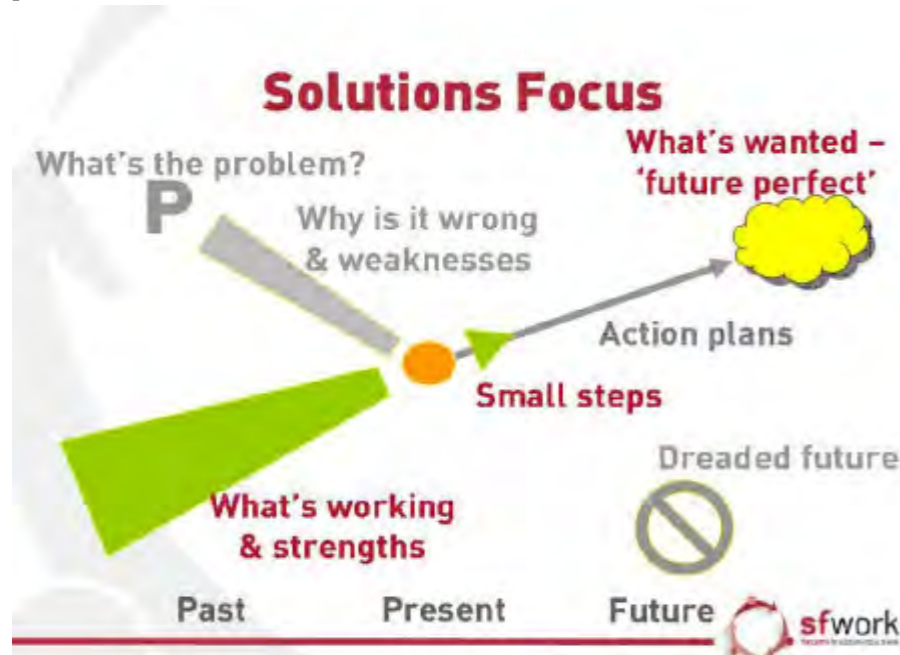
Small steps vs Action plans

Conventional management approaches always seem to involve action plans to meet targets. Today our health service and schools are driven by dozens of government imposed targets. And yet improvement is patchy, and sometimes whole areas are overlooked because they weren't in the action plan.

When former Prime Minister Harold MacMillan was asked about the greatest challenge he faced as a statesman, he famously replied 'Events, dear boy, events'. Things come along that you hadn't planned for, which throw everything off track. Everywhere I go people have the same experience - and yet we keep on making our action plans. The SF approach provides a useful alternative - small steps.

Rather than trying to lay out a plan for action, we arrive at first small steps - steps that can be taken tomorrow, cost little, and move things forwards. These steps

Continued over...



Safety in the Shade

Safety is vital in chemical plants. Personal safety is particularly important, and it is a legal requirement for firms to provide personal protective equipment, such as overalls, helmets, gloves and safety glasses, to their workers. Getting people to wear this equipment is, however, another matter. Often the workers have spent many years operating the plants and have stopped noticing the risks around them. One such chemical plant was jointly operated by Zeneca in Italy. The managers (and the law) wanted people to wear safety glasses. The workers, though, were reluctant. The solution emerged when someone asked themselves 'When does this Future Perfect even partially occur? When do our people wear glasses anyway - even when they don't strictly need to? We're talking Italian men here. When do Italian men wear glasses when they don't need to - when they are cool, fashionable sunglasses!

So they commissioned a set of safety glasses made with mirror shades, and made them available in the same way to operators on the factory floor. And a miracle did happen - the workers instantly began wearing them most the time. Even outside the chemically hazardous areas, in fact. From just a small change in the design came this very significant change in behaviour. Now, the firm could have chosen a problem focus instead - they could have studied the reasons for people not wearing the old safety glasses, their motivations for risking themselves and their health, the underlying causes of accidents around the world. Would this solution have emerged from such an inquiry? We guess not. (from Jackson and McKergow, 2007)



Working: 80 real-life lessons for successful organisational change - describes real cases from organisations around the world in the areas of

1. Strategy
2. Quality improvement
3. Morale
4. Sales
5. Project management
6. Everyday management
7. Reorganisation
8. Stakeholder management
9. Training
10. Outplacement
11. Leadership and change
12. Business disasters

For one manager's view of how SF has helped her in her role, I spoke to Antoinette Oglethorpe, European Learning & Organizational Development Director with XL Capital Ltd.

In the current climate, many HR professionals are being asked to become strategic 'business partners'; all the usual administrative stuff is being outsourced or at least assigned to a shared service centre, and specialist areas like recruitment, compensation and benefits etc are going into centres of expertise leaving the HR Generalists to "partner" with the business in helping them achieve their business goals through people. However, many of us are not sure exactly how to carry out this new role.

To play the role of business partner, it's often said that 'you need to understand the business'. Thankfully, SF offers a way to really support the business without the need to fully understand every aspect. It enables you to ask intelligent and relevant questions confidently without already needing to know everything about the setting. In many ways, you end up coaching the line managers to find a way forward.

SF would be a very productive way to manage processes like salary reviews. HR professionals often struggle to say 'No!' for fear of being perceived as not business-focused and have to resort to hiding behind policies. SF helps them get involved more easily and start saying Yes more - and more carefully. The idea of not-knowing helps a lot - and while it's a coaching model, this is definitely not the old 'manager-as-coach' idea. It's a great way to quickly build collaboration and work together.

In my people development role I use scaling a lot - for example in team development, with the manager and then with the whole team. I ask them things like, 'Imagine a scale from 1-10, where 10 is the best the team has ever been...where are you now?'. I think they like the fact that it all sounds rather scientific and precise, even though the whole approach is really just a way into a useful conversation. It helps you to find what's working, and find some next steps to move from say a 6 to a 7. If you just ask them 'how would you like the team to be', you end up with a huge wish-list. This way, it's done in 15 minutes and everyone's happy to be making progress.

The fact that this approach is brief is a big advantage in many situations. One of the challenges of my job is working with people across many international locations. I use SF in performance management with my subordinates - both face to face and over the phone. Also, I use it to work with our high-potential employees - they have constant time pressures, so staying brief is very valuable and practical. It certainly doesn't take a whole hour's conversation to achieve some useful progress.

I have also found SF an excellent way to raise my profile within the company. Being seen to be asking intelligent questions is a good - and relatively safe - way to be

noticed. Also, HR has an ongoing challenge of building a positive reputation with the business, so this is all to the good!

I like to use SF as a way to turn people around. Employees don't usually come to me to tell me happy they are and how good everything is...they come because something is wrong or needs fixing. This way I can be listening to them and moving on very quickly - without them feeling rushed or unheard. Employees often come to HR when they are fed up and thinking of leaving, and I have been able to help them feel better about the company and thereby increase retention this way too.

All in all, HR can be a very reactive job. SF gives you a way to approach things quickly and effectively. When waves of negative emotion come your way, you can handle it smoothly and turn it around. When people are focusing on what's working, you can quickly help them find ways to make progress. Then you can all get on with what's next.

Conclusion

To summarise, SF can help you move forwards, build change, stay positive and save time and effort. It's tried and tested and in use all over the world ■

To find out more, visit our website at www.sfwork.com. There you'll find information about books, training, user groups and lots more. Join the companies that are using SF by getting in touch with us today.

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ONE SESSION CAN HELP

Malcolm Droy makes a retreat

Most of us would agree that Hypnotherapy is not an overnight wonder (at least usually). We would normally want to see a client for at least three sessions if they had a phobia for example. A more complex problem involving severe anxiety or depression would need considerably more sessions to achieve the results we might wish for.

Is there any point therefore in only being able to give a client one session?

I would like to argue the case for just that scenario. I work at a health and detox retreat down in Somerset where clients may only stay for perhaps three or four days, others for a week or two. Hypnotherapy is one of a number of therapies offered to clients as part of a holistic body and mind programme. Clients are coming to the retreat for many reasons, some to lose weight, some to detox their bodies, some on the Type 2 diabetes program, others perhaps, to draw a line under their lives.

As a Solution Focused Hypnotherapist, I place considerable importance on giving clients an understanding of how their brain works; an insight into why they are feeling as they do or why they do what they do. So my first step is to give an open talk to all the clients in which I have the chance to lay down a solid foundation.

My talks include information about the way the mind operates and also give my audience the chance to draw parallels with their own experiences. Some times we focus on the broader aspects of how the mind works with an emphasis on positive change in relation to stress. In other talks we may focus on overcoming bad habits and addictions. Most importantly we focus on practical ways in which individuals can bring positive change into their lives. Perhaps by using a gratitude diary, exercising in a mindful way, paying attention to good sleep patterns, relaxing and very importantly developing the habit of noticing which area of the mind they are operating from.

In my experience, most of the clients come to the health retreat looking to create some real and lasting change in

Continued over...



Business applications

The SF approach sounds like a simple idea...but turns out to be counterintuitive in many ways. However, it's applicable to all kinds of business situations. My latest book with Jenny Clarke - "Solutions Focus



Malcolm Droy is a solution focused hypnotherapist working in Taunton with his wife Victoria.
- <http://www.therapysouthwest.co.uk/>

This helps me get more out of the session than might have been possible otherwise. Typically a first session with the client will be an hour and a half, combining an Initial Consultation with the usual range of strategies that we adopt in Solution Focused Hypnotherapy. Strengthening the client's insight and helping them through the positive process of turning around their attitudes is still valuable, even, if only done once. Let us not forget the powerful effect of the trance part of the therapy where we are starting the process of encouraging the subconscious to 'think' about situations in a different, positive way.

Significantly, I emphasise the importance of on-going homework to consolidate change. I encourage clients to complete three daily tasks for at least the next 30 days, these typically include, filling in a daily gratitude diary, a daily reading of the notes on how the mind works, and daily use of my self hypnosis CD. Homework builds on the client's immediate sense of benefit and helps to establish new patterns of behaviour as he or she returns to the 'real world'.

I accept that a course of therapy could perhaps achieve much more, but I feel satisfied that I give clients a solid start from which to continue further change.

Sometimes I encourage them to seek out a Solution Focused Hypnotherapist when they get home so you may find you get a call ■

withdrawn themselves from their usually stressful lives. They are supported and in a stress free environment away from their habitual triggers of behaviour. They have come together with other like-minded people, are committed to personal change and are ready to support each other. This makes the retreat an ideal environment for Solution Focused work and for all these reasons I believe the clients at the retreat are often much more open to change than those I might see outside.

When I do see a client individually I am fortunate to have a head start in that he or she already has an understanding of why they are troubled, following the talk. Remember too, they are in a stress free environment and primed for change.

their lives. Often they have focused mostly on their bodies, their eating habits or a sense of being physically unhealthy. Talks about how the mind works combined with Tai Chi and Yoga help bring about a more balanced mind-body view to what has gone wrong in the past. As a Tai Chi instructor as well as a hypnotherapist I have an opportunity to begin making the mind-body connection while introducing clients to Tai Chi, emphasising and demonstrating the physical power that can be developed through body relaxation and mindfulness.

I find there is another great advantage to therapy at the health retreat and that is the environment. The clients together with a caring group of staff, create a very healing environment. Clients have

A NOVEL APPROACH

Hypnotherapist Karla Howes shows we don't need a clinic to get results

When I started my training with Clifton Practice Hypnotherapy Training (CPHT) in January 2012, David Newton told the group we needed lots of practice and to see as many people as we could. At the time, I worked with around 80 people in an office in North Bristol and thought to myself: "I know lots of people who would benefit from a bit of relaxation".

I approached a few friends and asked them if they would be willing to help me at lunchtimes, all of them agreed. I had booked a room but I was on edge about it as it was quite noisy and I thought we would be interrupted. Needless to say, the 'client' didn't get the best from it either.

So, I decided that I would conduct the next session in my car. It had a comfy seat, which reclined, built in CD, heater, and privacy as it was parked in quite a large car park – perfect! I put a couple of blankets into the car to complete the ambience. I was much more relaxed so the 'client' was as well. It was then that I learnt that I would not say "Sorry" if I read a word from the script incorrectly and to always have a drink to hand as my throat got dry, something I still do now. I kept my scripts and paperwork in a case in the boot of my car, so when I walked to my car with my client and opened the boot I had to mention that they didn't need to get in the boot! This always got a laugh and put the client in the left pre-frontal cortex straight away!

I was seeing up to 5 clients a week at one point during my lunchtimes, which made the afternoons nice and easy as I always get the benefit of the trance as much as the client. Word spread quickly in the office as people noticed how chilled my 'clients' were, and I soon started getting enquiries from more of my colleagues who I had not

previously approached. These colleagues had genuine issues that they wanted to resolve; this proved to be a quite different experience to just practising relaxation with friends.

I helped one lady who was having panic attacks 2 weeks before her wedding, she wanted to call the whole thing off! After the initial consultation everything just clicked, as we know it often does, and she went ahead with the wedding and thoroughly enjoyed it.

Another colleague was having confidence, motivation and anxiety issues. We had weekly sessions, which started in the spring so the weather was warming up and the sound of the birds tweeting at exactly the right moment in the script always made me smile. I used to have the windows open slightly, whenever the weather allowed in order to listen to the birds. The client never noticed as she went so deeply into trance. I saw her for a total of 9 weeks, during which time she applied for another job and got it!

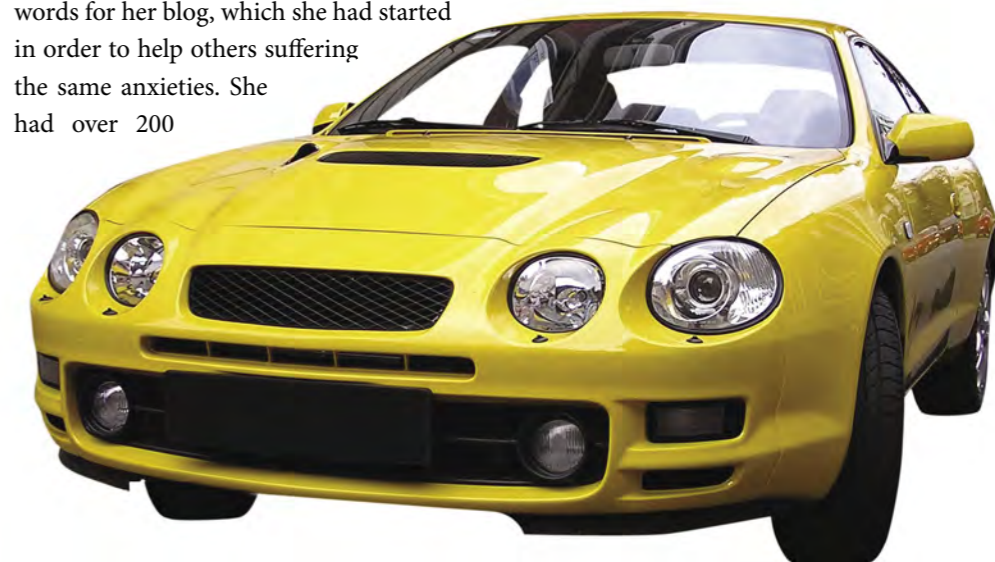
A young lady who was temping at the office asked me to help her as she had just found out she was pregnant and was extremely anxious about it. During the course of our sessions, she went for her 3 month scan and found everything was ok. Her primitive brain had convinced her that it would not be, so she was very relieved and started to enjoy her pregnancy. I wrote a few words for her blog, which she had started in order to help others suffering the same anxieties. She had over 200

followers!

Another lady who had some experience of meditation loved the trance sessions but once I started practising the psychotherapy part of the sessions, she became more reluctant to continue and she also began to find fault with my CD and wanted me to change it. I found this quite difficult at first but after speaking to my supervisor, realised she was a warrior who wanted things her way or not at all. I told her that she needed to listen to the CD I had given her before we had any more sessions. Needless to say, we didn't have any more sessions.

I saw another two ladies who were both suffering from low self-esteem and anxiety. Both had recently got engaged and were in the grip of their primitive minds when planning their weddings. One ended up gaining enough confidence to run the Bristol half marathon and the other got a promotion. Both are now happily married!

So my mobile consulting room (i.e. my car) served me very well during my training and helped me practise with many more people than would have otherwise been possible. It has all the things you need when conducting a session so give it a try. You do have to keep it clean and tidy and clear out those sweet wrappers regularly which is an added bonus ■





THINKING OF UP YOUR OWN

Nicola Green finds the solution to her therapy room problem is to think big.

If so, this might be of interest...

Occasionally I get asked what a therapist should look out for when approaching a clinic to work in. My standard response is a) a bit of flexibility as you get established, b) reasonable rental charge, c) back up and support with your marketing, i.e. a page on the clinic's website, mention of your services in their newsletter if they have one, and wherever possible the opportunity to do a window display or some sort of display in reception.

However, when it came to setting up my own clinic earlier this year, I had to come at things in a completely different manner. I was sitting on the opposite side of the fence so to speak.

The following is based on my own personal experience. Should you decide to set up a clinic then you will find things will differ depending on whether it's a multi-disciplinary clinic or just hypnotherapy, how big the clinic is and how old/new the building is. Although I highlight the pitfalls, I have to say the whole experience has been enjoyable and thoroughly rewarding.

Finding the right place to call home

Firstly, you have to find a premises to work from. Not necessarily easy I can guarantee you. We (it included my husband Dave as well) wanted an old place with character and warmth. It would have

been easier and hugely cheaper to go for a new place, but that bit is down to personal preference. Then there's all the rest to take into account!

1.Location/Footfall

I wanted somewhere in central Cirencester as I see a number of students who walk round to see me straight from school. I also see pensioners who no longer drive and are situated in residential homes in town. I also wanted people to see the clinic as they walked/drove past. We didn't want to be in the town centre as the cost would have been horrific, just the

YOU NEED AN EXCEL SPREADSHEET, A CALCULATOR, POSSIBLY AN ACCOUNTANT OR MAYBE A GOOD FRIEND TO DOUBLE CHECK EVERYTHING.

Council rates would have put a stop to that let alone the rent, but we needed to be on one of the main routes out of town.

Once you've found your location, one of my tips is to stand outside where you intend to rent and see what drives/(who) walks past! Obviously there are many ways to market yourself, but traffic passing by is a great free way of encouraging people into your clinic.

Then check out parking. How close are the car parks, if the place you're considering has its own then fantastic, a big plus. If street parking or pay & display car parks are reasonably close, then fine. If there's no parking anywhere near you, you'll possibly need to reconsider because how are your clients going to get to you in the pouring

rain in winter? Personally, I don't relish turning up to work like a drowned rat, so never mind my clients as this is something that is a top priority for me!

So when searching on the internet for 'offices to rent in Cirencester' and 84 Dyer Street came up, it fitted the bill for all of the above, but instead of just the couple of rooms we wanted it had seven! We therefore had to adapt our thinking and the rest is history as they say.

2.Big v Small

Previously, after quitting working in other people's clinics, I'd set up my own place just for me - one room with a nice waiting area outside, plus a large room opposite for my hubby to work from. After finding out that the landlords were upping sticks and moving, we started to look for something similar in size, but nothing suitable was to be found.

The advantage to where we'd been previously was lower cost and low maintenance. It was easy to do a quick vacuum around at the end of the week and make the place tidy, the footfall was low so the carpet didn't take a hammering and when we paid the monthly rent it was sensible, cheaper than working out of three clinics full time in fact!

As we looked around No 84, our potential new home, I was struck by the size of it. The seven rooms were over three floors; there was a double frontage right onto the traffic lights - great for marketing,

SETTING CLINIC?

but not so hot for window cleaning and the fumes; the place needed to be re-carpeted and decorated; we needed furniture etc, etc. There was also the pressure of getting rental for the rooms in order to pay the rent, not monthly now but quarterly.

3.The Building

Once you've found somewhere you consider viable, you'll then need to check it over for what needs to be done. Usually the Landlord is responsible for exterior repairs and you'll be responsible for interior repairs, though now is the time to push your luck and try negotiating for a lick of paint internally or new carpets if needed etc. Get confirmation in writing of who is responsible for what and what is going to be done before you move in. DO NOT be a nice person and go on trust, in the harsh business world you'll probably end up regretting that one, you need written an agreement of what the Landlord is going to do before you move in, usually this is integrated into the lease.

Talking of which, let's consider the lease. We ended up with a 6-year lease with agreement that the rental would go up £500 per year for the first 3 years (given we'd knocked them down a few £1,000's then it would stick for the remaining 3 years. We also had a 3-year get out clause.

We checked out our landlady and found she'd purchased the building as part of a Self-Invested Pension Plan. Given she's not old, we felt she was there for the duration and wouldn't be upping sticks like our previous Landlord. We knew we'd have to invest money to get the clinic as we wanted, so this last aspect of longevity was very important to us.



Take photographs of each room inside so that when you pay your deposit, you have evidence of what the place looked like when you moved in.

As you view the property, before committing to it, stand in each room and write down what you need to do and then do the same for the building overall. This will help you assess the costs involved (more to follow on this)! We found it takes two of you to do this as you will miss obvious things.

4.The Cost!!

I now want you to think about the TV program 'Grand Designs'. You see purchasers setting their budget and you already know what's going to happen, yep it trebles overnight. And once you're tied into a lease you can't turn around and say 'Ooops, sorry, didn't quite add up my sums properly'.

You need an Excel spreadsheet, a calculator, possibly an Accountant or maybe a good friend to double check everything. You also need to put everything down that you'll need to buy, from loo cleaner through to carpets, from a mini fridge through to a hydraulic or electric couch. Whatever it is that you think you'll need. And remember, if you're setting up a multi-disciplined clinic, it's not just talking therapies you've got to think about. Acupuncturists and other such 'hands-on' therapists need running water in their room to wash their hands frequently; you have to supply bins for couch roll to be disposed of in each room; and do you know how much a hydraulic couch costs?!!! That was a real jaw-dropper for me, luckily we got an absolute steal on Gumtree from a Bournemouth hospital who were almost giving them away simply because they didn't have the sticker giving the maximum weight load. I love red tape sometimes.

Continued over...



Here's my initial list to budget for, I know it increased considerably but I don't want to frighten myself by investigating further than this right now:

Solicitors costs, rent, heating, electric & gas bills, business rates, signage for outside (large company name sign plus secondary sign listing all the therapies), paint – we needed a lot of it and it's not cheap, carpet (blood pressure went up at that one), first aid box, up lighters for massage room, hydraulic couch, static couch, hypnotherapy reclining chair, throws for couches, couch roll, seats and tables for each room x 4, reception desk, wifi/telephone, seats and table for reception area, new blinds for windows, fridge and microwave, new fire extinguishers, CD players for each room x 4, clocks x 4, public liability insurance (upgraded with my existing professional liability insurers), the cost of an open day to launch the clinic etc etc etc. I had question marks over the cost of window cleaners, office cleaners and a receptionist (consistency of caps) and decided to go for the window cleaners at £15pm (4 windows over 2 floors plus the sign), gave the office cleaners a miss as we do it ourselves and finally the big one, the receptionist.

Given the hourly rate we were to charge therapists, the rent we had to pay and then the general overheads, it was very quickly obvious we couldn't afford a receptionist. This bit is still under review as I write this, but I didn't want a school-leaver who didn't know anything about any of the

therapies, who would do more harm than good. Plus, what would she do all day? In previous clinics I'd worked in, when things went well it was usually because they had a sort of practice manager at a heftier wage. She would then take charge of marketing as well as dealing with clients, sort out spreadsheets and generally earn her whack, but we didn't need that as I dealt with spreadsheets/marketing etc. However, when I'm in with clients that means the reception is a self-service affair with a very large sign saying 'Your therapist knows you are waiting, please take a seat'. This means we potentially lose some new clients who come in to enquire and don't want to then take a note of our clinic phone number to call back; therapists may not get as many clients as they might have, which in turn means we may not get as much rent! It was a dilemma and it still is, but most clinics I'd worked in previously only had part-time receptionists and when they went home we fended for ourselves, so I knew it was possible.

At this point, and in order to calm myself down, I went off to have some hypnotherapy! Then I got the calculator to work out what potential income we could earn. Now this is the scary bit as no-one is going to guarantee you any income whatsoever. However, being brave, I looked into what clinics around the country were charging, which ranged in general from £4 per hour in the outskirts of Cornwall up to rates of between

£10-£15 and beyond in cities. I then looked at my local competition, bearing in mind they did have a receptionist until 4pm each day so the therapists had a bit of back-up and I knocked a few quid off the hourly rate to compensate.

I ended up with a figure of £10 per hour if charged ad hoc and £7 per hour if pre-paid a month in advance for a minimum of half a day each week. I offered flexibility as we got the clinic established, i.e. charging £7 per hour on an ad hoc basis for the first two months as therapists got established. After two months we sat down and discussed whether they wanted to continue ad hoc but at the increased cost of £10ph, or whether they were happy to switch across to pre-paid in order to keep the £7ph.

I then sat back and worked out how many hours a week I needed to have rooms booked out in order to get the income I wanted to contribute towards the overall rent – given I would contribute some and my lovely hubby was taking over the top floor and would be paying his way.

What you have to consider with the journey we took was that **1.** My husband's business would also be based at this building so he stumped up a lot of the money to do the above, I couldn't have done it on my own to this standard. **2.** We were looking for a home for our business for the long-term so were committed to spending extra to get the right feel. **3.** If I was going to set up a clinic then I wanted it to be how I wanted it to be, a really great place that people talk about – which they do!

If you want to set up your own clinic, you could do it much cheaper than we did, either by down-sizing, going for a newer property in better condition or by cutting a few corners and not going quite so overboard!

5.The Therapists

I used good old Facebook to spread the word that I was setting up a clinic. I'd set up my Facebook 'Like' page before we'd even picked up the keys and was tapping out messages and building my audience. We needed to get awareness out there fast in order to get therapists signing up, let alone clients booking in.

The first bunch of therapists I knew personally, they either made contact as a result of Facebook or via word of mouth. Because I'd worked with them previously, I trusted them and knew they'd be right for the clinic. The second bunch were people who approached me who I didn't know. These people I interviewed, obtained their Professional Liability Insurance certificates and qualification certificates.

I provided: a website page for each therapist, the offer of a window display, an area for them to display leaflets, back-up marketing support via the clinic's Facebook and Twitter pages, plus I advertise the clinic itself which in turn brings clients in for the therapists.

I make it very plain up front what we don't do. So, the fact we don't have a receptionist, the fact it's up to the therapist to get clients, we're merely supporting that effort and I also highlight that the sound-proofing is not that great. I need therapists to sign-up based on the truth and not be able to complain 3-months later that things aren't as they want.

I request a deposit of £50 in exchange for a set of front door keys (we have two locks). This is because the initial key cutting x 15 sets cost us over £150, so if one therapist loses the keys, we have to re-cut them all for the new locks.

We have a Room Rental Agreement laying out what is expected of the therapist and what we provide in return, i.e. tea/coffee/couch roll but they have to get the milk if

I'm not in!! You know, the simple stuff that makes the world go around.

Because we don't have a receptionist, we have an online diary so therapists can book themselves an ad-hoc room without having to contact me. We started with Google calendars but had a few glitches so moved to Online Diary Booker which costs us £10 per month and works well.

6.What Else?

- Do you need 'Change of Usage' permission from the Council?

- The Environmental Health Officer needs to check the premises if you have therapists such as Acupuncturists.

- Do you need the Council's permission to put signs up outside?

- Check online your responsibilities for health & safety.

- What happens if you run the clinic and you want to go away on holiday, do you need someone to step into your shoes? If you have a receptionist then I suspect not, but if you don't then you need a reliable therapist or perhaps a family member to take over.

7.Finally, You!

One thing I hadn't considered enough was the call on my time. If the rooms aren't booked out one morning, do I give up that particular morning off and go in to open up and man the reception? I somehow adopted No 84 as my baby and used to feel this maternal pull which meant I worried about it when I wasn't there. I'm pleased to say I've now been for hypnotherapy again and managed to get over this, if the front door is closed then so be it, I have to have some time off occasionally!

There are also the instances where a new therapist forgot the inner keypad number and was sat in reception with a client and unable to get into the therapy rooms, whilst I was at a meeting with no mobile phone

signal. Or the time I hadn't yet handed over the keys to one of our hypnotherapists and she was on the doorstep waiting for me to arrive, whilst I was oblivious and off in the other direction to have my blood pressure taken at my GPs. Interesting how fast you can drive in the opposite direction to the GP and still have a good reading when you eventually arrive – all down to deep breathing techniques and calmly saying to yourself "no-one's going to die, it's all okay"!!

8.The Rewards

Having your own place gives you space to file things away and not have to lug client files from clinic to clinic. It gives me a sense of 'arriving' at a good place in my career and it makes me smile when I think of our lovely clinic and how well we all get on there. It gives me flexibility to come and go as I please with my own room, not having to pre-book and ram clients into a 4-hour slot. I can also adapt the clinic for different occasions, such as supervision/open days etc. Plus, I get to call the shots, if I don't want to do something I don't have to, which is rather enlightening.

We launched our clinic in March 2014 with two Open Days to attract the public, which was a huge success mainly due to hammering it home via Facebook and encouraging people in with free mini treatments, tea and cake!

As I look back, I laugh. Having picked up the keys in the first week of January, we promptly went off for 3 weeks holiday to get married, arriving back in the UK on the 7th February with a month to do all of the above. But then again I get bored easily and my poor husband had lived with me for 10 years so knew full well what he was getting into! So my top tip is don't do it like we did – give yourself a bit of time ■

P.S. Thank-you Dave, you are a complete star.

How can Stage Hypnosis help the Hypnotherapist?

Some of you may know that as well as being a full time hypnotherapist & supervisor I also work as a magician: performing mind reading, close-up and stage magic. As a result of this lifelong love of conjuring, music hall and all things theatrical, I have a very keen interest in the performance aspects of hypnosis and how this can be utilised in our therapy room.

So with that in mind I would like to explore the parallels between stage hypnotism and hypnotherapy, in the hope that it might dispel a few commonly held misconceptions and encourage a greater belief in the process of (gulp) hypnotic phenomena in order for us to make stronger use of trance in our practice rooms.

Remember your placebos & cues

Often, in an attempt to reassure a client a hypnotherapist might choose to distance themselves from the more extreme phenomena of stage hypnosis and dismiss it as mere drunken tomfoolery.

They might make statements such as:

- ◆ Hypnosis is just like relaxation
- ◆ Hypnotised people on stage are just playing along
- ◆ Hypnosis can't make you do anything you don't want to do

Although reassuring, these statements might reduce positive expectations and create limitations to the client's trance state. However, if we amend this list we might say:

- ◆ Hypnosis is focused observation
- ◆ Hypnotised people engage because their critical faculty is temporarily by-passed
- ◆ Hypnosis helps achieve your goals

These observations will go a long way to changing how you can proceed with your trance and the phenomena you create with your client as a result.

But what exactly is a stage hypnotist doing when he seemingly takes people up on stage and instantly makes them do weird things?

How does he do it and what's really going on?

1. Creating the trance from the start of each session -

Trance is focused concentration – channel that focus immediately

OK, here's an interesting observation to mull over: You can be relaxed without being in a trance, or you can be in a trance without being relaxed (consider the trance state of arachnophobia for example) so let's dismiss the idea that hypnosis is the same as relaxation. It isn't. In fact let's take this theme further and suggest that hypnosis is whatever you (the HYPNOTIST) says it is.

(Note: clients relax because we suggest it)

We all know that trance is simply focused concentration and so we want to create this at the very start of our session. A stage hypnotist has his spiral wheels, goatee beard and posters advertising mind control. We have our whale music, cardigans and websites depicting happy smiley people flying kites.

Both approaches use appropriate imagery to broadcast intentions and promote specific outcomes.

Years of walking up to strangers as a hired performer have taught me to move purposefully towards the group with a clear

UTILISING HYPNOSIS FOR THE THERAPY ROOM

Stuart Taylor opens the magic of our minds

intention as to how I want the situation to proceed - You can think of this as solution focused positive forecasting if you like! - and I approach my therapy in much the same way. I want to focus attention and begin influencing immediately: Basically, I want to move my client into a positive (waking) trance state as soon as we make contact.

This rapid progression (via compliance) into a trance state is much the same as that of the stage hypnotist, but thankfully we hypnotherapists can afford to dispense with the showbiz brashness and be very gentle during this process - We might discuss the cricket scores as we walk along the corridor to our consulting room, or compliment our client on their punctuality, but the fact remains that we have subtly focused our client into our area of thought – our topic of conversation.

In effect - The client's mind has become intellectually engaged with our wit and wisdom! The game is already afoot – before we have even reached the consulting room.

Our first (formal) question at the start of each session is a continuation of this.

“What's been good about your week?”

Our stage counterpart would think of this as a pattern interrupt - a point in which we change the thought flow of the client in order to channel it where we want it to go.

Remember: Positive conversation can be just as mesmerising as a swinging pocket watch when utilised effectively.

2. By-Passing the critical faculty -

Playing along with positive suggestion.

Just like a handshake induction technique - where the hypnotist breaks thought patterns by interrupting the casual flow of a handshake – so our pre-session chitchat serves much the same purpose. Our client is no longer thinking their thoughts ... they are considering ours!

Having placed our client in a positive mindset we can now consider all the things we can do to deepen the process as we relax our client and programme the entire session to maximize successful outcomes.

Note: They are relaxing because of the comfortable situation they find themselves in and the hypnotic suggestions you are delivering – they are responding to the situation you have set up.

So in the same way a stage hypnotist leads with a yes set, we too are gently leading our client into trance.

3. Encouraging the belief in believing -

Explaining what hypnosis can do rather than what it can't.

Here's something that I think is fundamentally important with regards to hypnosis – and that is the belief of the

hypnotist. A stage hypnotist is all spangly suits and fake tan, but this adds weight to the claim that they can indeed do what they claim they can do. They look the part – see the suggestion there?

A stage hypnotist doesn't get up on stage and say he's going to try to hypnotise his volunteers.

He strides up and announces that he will. That when he snaps his fingers, says sleep etc. they will comply.

This aspect of our persona, how we present ourselves - our act, so to speak, is well worth thinking about.

Over the years many people have asked me all manner of questions on the subject of hypnosis, and conversation soon turns to phenomena they have seen on television or heard via a friend-of-a-friend; All those urban myths that would suggest that there is an element of danger or a loss of control involved in the process.

In order to reassure these concerns we may be tempted to provide a list of things-hypnosis-cannot-make-you-do but it is my belief that we don't need to limit the power of hypnosis in order to gain our clients trust.

Rather than diminish the pre-existing belief in the strength of hypnosis I prefer to reframe my client's understanding of trance and turn it into something positive that will benefit us both in the therapy room.

I want my client to believe in the power of hypnosis. Just like any area of solution focused therapy I want to reinforce the positive aspects of what hypnosis can do – rather than what it cannot. I want them to trust me and know that I won't make them do silly things in trance. That we are here to utilise the positive aspects of hypnosis in order to generate deep and lasting

subconscious change.

This approach builds trust in you as a therapist and in the process in general without diminishing prior beliefs or positive expectations. This makes a very real difference to the weight of suggestion placed during a trance state.

It's all hypnotic!

Regardless of whether a person volunteers for a stage show, or contacts a hypnotherapist for help, their general intention is the same: they want to be hypnotised in order to experience/promote change in their subconscious.

(Note: They WANT to be hypnotised)

So although our clients don't end the session dancing with brooms or eating onions (well, not usually) they are still responding to imaginative concepts suggested to them during hypnosis. They get to make changes in their lives simply because the idea that something could be altered or re-evaluated was offered to them whilst experiencing that natural state of trance.

Therefore we never need fear a client's concerns about hypnosis, or diminish their beliefs in its power – we just need to use all our solution focused creativity and imagination to reframe the observations and create a more positive framework from which to hang our suggestions.

Have fun! ■

Stuart Taylor is a solution focused hypnotherapist and supervisor working in Bristol. He is also a stage magician. He can be found at: <http://www.taylorhypnotherapy.co.uk>

WARMINSTER WRITERS CIRCLE ASSISTS LOCAL CLINICAL HYPNOTHERAPIST

Clare Hancock with the metaphor writers



Clare Hancock, a Warminster based Solution Focused Hypnotherapist, recently suggested a competition for the Warminster Writer's Circle. Clare asked for a 500 word metaphor/story which she could use with her Clients under Hypnosis. "The Subconscious Mind loves working with metaphors and stories" said Clare. "Stories will fix ideas and messages well in the mind, they can be problem solving instruments and positive behaviour changes can follow"

The Writers Circle members submitted 13 anonymous scripts for Clare to judge. "It was really hard, as they were all of a very high standard and very imaginative" said Clare. "I read each one many times, and decided the winner should be a script entitled 'The Crab Apple Tree and the Gooseberry Bush'. Clare chose this story as it is a succinct way of conveying the message to the subconscious mind that sometimes we need to ask for help to find a solution, about thinning out too many entanglements in life and to look for a happy future. It was not until the evening of the prize giving, that it was discovered that this metaphor had been written by her Mother – Bidy Shephard, much to the leg pulling and amusement by the group!

Second prize went to 'The woman who was dressed in black' by Sheelagh Wurr; third prize to 'The Brave Mole' (a lovely child's story) by Jill Flaunders; and highly commended to 'Old dogs can learn new tricks' by Daniela Mulholland.

Clare chose the top four stories because they are the ones she will use most in her Hypnotherapy practice.

Book marks and biscuits were given to the group by Clare as a token of her appreciation for all their hard work. She gained permission from the writers to use the scripts in her work and to share them with other Hypnotherapists by publishing them in the Hypnotherapy Today magazine.

Bidy has been a regular member of the Writers circle since 1990 and says "It was a fun evening, raising interest and questions about Hypnotherapy which Clare duly answered. The Writers seemed to be intrigued by the unusual challenge as well as her feedback for each metaphor.

The Warminster & District Writers Circle is intended for men and women of all ages and abilities to get together and feel confident about reading their published or unpublished works of short stories, poetry, articles etc. ■

Photo shows Clare on left presenting the £20 prize to Bidy.

The crab apple tree and the gooseberry bush - First Place

Metaphor by Bidy Shephard

A young couple bought an old cottage and after making improvements in the house, turned their attention to the garden, which had some ancient fruit trees and bushes. The crab apple tree had suffered from the winter storms and had cracked and withered branches. But the main trunk was still strong. Nearby was a sadly neglected gooseberry bush with its prickly branches grown thick into a thick tangle. Who would hazard picking fruit among those sharp thorns?

The woman said to her husband "Don't you think it would be better to dig them up and replace them? I would prefer a sweet apple and I'm not keen on gooseberries either – too sour!"

The husband replied "Perhaps we should consult the old man next door before we get rid of them. He's obviously a good gardener and you know how your mum loves crab apple jelly instead of marmalade."

So they asked the old man's advice. "Have you heard about grafting?" he said. And he told them how it was done. "You could have some nice eating apples in a few years time and still have crab apples off the same tree. And the gooseberry needs a lot of the dead wood taken out to make what's left nice and open. It's called 'Golden Drops' and its sweet and delicious, a dessert gooseberry. You don't need to cook them at all. I know just the chap to do both jobs, from the plant nursery just up the road.

[Thin out too many entanglements in your life]

The spirits of the crab apple tree and the gooseberry were good friends and talked to each other, in their special way. They heard the conversation about their future and dreaded what might happen.

[Fear of an operation]

When the time came for the grafting, the crab apple suffered pain, but it was quickly bound up and new growth began. From that pain would spring a wonderful regeneration of fruitfulness. The gooseberry bush felt much lighter and healthier after its overcrowded branches were thinned out and opened up to the air. Now there was the promise of delicious fruit to come.

[Look for a happy future]

Second and third place metaphors will be featured in the next edition of Hypnotherapy Today.

GETTING THE MEDIA RIGHT

Duncan Little shares some secrets of his past life

Marketing is always a challenge, isn't it? Where do you start? How do you keep up with it all and how do we make ourselves even more attractive for a potential client who has an array of therapies to choose from?

Well, as Christmas approaches (and with it New Year's resolutions) then perhaps now is the best time to push for those new clients. Don't forget that the most important part of your business is YOU and marketing yourself need not be difficult.

Tidying up and sprucing up your website is an obvious starting point alongside making sure there is that all important professional looking picture of you on there. When it comes down to pictures then a professional photographer is certainly a worthwhile investment as they can provide good lighting for you and can also position you in a way so you get the best out of the session.

There is the added benefit of a post production enhancement of tone and balance in the picture itself.

For a reduced budget then you can always do it yourself but make sure there is plenty of light and, to help those positive mirror neurons flow, then ensure that you smile! Angling your head (or body if you are having a fuller picture) is important as you don't want your profile to look too much like a passport picture.

For most businesses these days then an on-line video platform is a must. Not only does having one help you climb the Google rankings list but it also allows for a chance for the potential client to actually feel that they have met you and so gain a feel for the person who you are.

Again, a professional (and reputable) company is an important starting point. Ideally choose one

that has broadcast experience and which has been recommended to you for the quality of their work.

Make sure they have professional indemnity insurance (alongside all the standard public liability insurances) so you are covered if their work falls far short of your expectations.

If their personnel have worked in the industry then that's even better (and awards are a further plus point).

Watch their on-line videos! We've all seen enough programmes to know when something "feels" right and so if their videos look good and "feel" right then the chances are that their editing and camera work is up to standard. If, on the other hand, the lighting is poor or there are lots of "jump cuts" then it may be best to avoid them.

It may be tempting to save the cash and try to do it yourself but I really would recommend against it. Directors, journalists, producers, editors and camera operators can train for a long time, work in the industry for a long time... and still get it wrong!

Video production is a really specialised area where it is easy to make mistakes and so for a polished product then it's worth saving up for it and put aside an amount every month to realise that goal when finances allow – remember that professional first impression is all important.

There is such an array of cameras and editing packages in a constantly changing marketplace so it is hard to say what is better than any other item and you really do have to know your stuff when it comes down to using these programmes. In short, if you want a professional look then go to a professional. Remember every video sequence has to be thought about and, effectively, storyboarded in one form or another.

A professional item, even at three to four minutes long, will have a filming schedule, script and a degree of direction implemented when filming. Even short films require significant input and planning which is why you can expect it to cost anywhere from around £1,000 (at the lower end) upwards.

A good production company will clear usage for music copyright and also gain the all important written consent of anyone that might be included in the finished piece.

Once you've found the right company then take time to work out what you want to say and how you want it illustrated. The perfect show reel is the equivalent to an "elevator pitch" whereby it's short, sharp and to the point.

Three to four minutes maximum is a good length for your video – too long and it will lose its impact, too short and we won't feel that we have got to know you! Either way, video is a visual medium and so we need to avoid a single "talking head" for too long.

Not only do we want to meet you but we also want to see people doing something – whether it is someone running (if you're working with an athlete, for instance) or a more metaphorical approach, perhaps with a bucket being gradually filled with water until it overflows or breaks.

When delivering your "piece to camera" (PTC) then it's always best to angle your body slightly and to avoid being too much "straight on" to camera – a slight angle makes the picture more interesting and, if the framing is right, can really enhance the whole feeling of the video itself.

If clients are happy to do so then perhaps you could ask if they would be happy to be interviewed – their "sound bites" only need to be a few seconds but long enough to establish your capability to the viewer.

When you present then if you don't want to look into the lens itself, look off to one side (to the camera operator or interviewer) as it will look just as natural and is a proven techniques used frequently on television.

If your client is happy to be interviewed, make sure you have their written consent. If your clients don't want to be filmed then you can break up your film with copyright free music or pictures of you meeting someone and running through the Initial Consultation with them.

In any event, and I cannot stress this point enough, make sure you have some idea of the message you want to get across before you start as most of what you see on-line, or on TV, is down to perfect planning.

And finally, enjoy it. This is your chance to become a star and spend a day working on a product which is going to put you in a positive light and, whatever you do, do it with a calm, confident and relaxed attitude as we all know that this is the secret to success ■

Duncan Little worked in regional news for both BBC and ITV. He has two international REMI awards for his work in television and is now Head of Media for AFSFH.



DEATH IS NOT THE END... BUT A NEW BEGINNING

A case study by Matthew Dennis

As a newly qualified hypnotherapist there are times when I questioned whether I was doing the right thing, whether I really was benefiting people or even whether my decision to become a hypnotherapist was the right move.

After all, I came from an employed position where such luxuries as salary, holiday pay and sick pay gave me a comfy cushion to catch me should I fall. For me, the decision to make that move was a combination of three things. Firstly, the urge to be able to help people. Secondly, the disillusionment with my job at the time and thirdly, a visit to a Solution Focused Therapist who some of you may know, Heidi Hardy. Heidi's face was a picture when she asked me what had been good this week and I said that I'd signed up to CPHT to become a Hypnotherapist!

Anyway, as my part of our HPD we have to submit case studies and work with clients. It was one of these in particular that really had an impact on me and allowed me to see that what we do and how we do it is of fantastic help to people and can change their lives.

Around my eighth month of training a lady called Emily called to book an initial consultation. I had been recommended to her by one of my previous clients (it just goes to show how important word of mouth is, even in the early stages). Emily came to the consulting room and was very quiet and nervous. She was a slight, bespectacled woman in her late sixties. She sat hunched over, her body language, eye contact and general demeanor was of a woman defeated.

We discussed what it was that Emily would like hypnotherapy to do for her. Emily had, a year and a half ago lost her husband. She was not with him when he passed on and now felt that she could no

longer deal with life. Her motivation had gone. Her purpose had disappeared. She felt that the grey clouds had gathered around her and were now beginning to smother her and she was almost content to be smothered!

I felt for Emily. She had a soft and sweet personality beneath this impending doom and clearly felt lost and incapable of coping with life. When I asked her what it was that she wanted from the therapy she merely said that she wanted to be able to cope. I asked her what this meant and she expanded slightly that she would like to be free from the emotions that assaulted her and to be unbarracked by the gloom of her internal voice.

We ran through the initial consultation and focused on sleep, processing stresses and strains from the stress bucket and how her current tiredness was undoubtedly affected by having so much to process. We also focused on what we were going to do: to help her focus on the positives, to get that serotonin flowing through her system to help her be that 'brave coping soul.' We then took an initial reading for the ORS (Outcome Reading Score). Emily marked herself a total of 1.6 out of the 70 available. She left with the CD and with what seemed like little hope. Here, for those of us who are new, it is important to note that I was nervous. Had I done the right thing? Was this therapy the right route for Emily? Was I capable of dealing with something that was so grievously affecting someone? Yes, is the answer to all those things. Supported by my tutor (Matthew Cahill) I prepared for our next appointment. It was important for me not to show my nerves or my concerns, but to be that confident individual that Emily needed to see to enhance the therapeutic relationship.

Session 2

Emily came in, again downcast and despondent. I asked what had been good about the previous week. Not too much it appeared, but after a little cajoling we established that Emily had volunteered at both a local castle and a museum. I congratulated her on this as it was a great step forward and we delved a little more into what she had been doing there. She had had a short training course with some people and said that it was nice to feel involved in something. I took the opportunity to discuss positive interaction with her along with some general revision. She also mentioned that she had enjoyed listening to the CD and related a funny story based around getting the CD to work. She smiled, the first I had seen. She scaled herself as a 5 on happiness this week, and the miracle question following this led down the route of getting paid employment and that she would start writing her CV tomorrow. Scripts used – Stairs, Trees, Create Happiness, Key to Success, Village (plus an exert of Game Players – an image of yourself as you want to be.....). I also asked Emily if she would keep a grateful diary, three things a day that she is grateful for or happy about. This was a technique that I had found personally incredibly useful.

Session 3

Emily's demeanour was somewhat more positive this evening. She had joined an art group to explore a love that she had not visited for years. She had written quite a few things down on her list ready for me, including the beauty and colours of the wild flowers that were starting to come out. Her 11 year old spaniel bouncing around fields. Her daughter had come around for a roast. Her work at the castle was going well and she enjoyed talking with people. She had taken a walk in a local wood and had come across a placard on a bench which read 'Fall down 7 times, stand up 8.' and this had stayed with her all week.

We really honed in on the revision side this week. Talking feelings and actions, talking of serotonin creation and positive cycles. Emily was nodding along and agreeing and, importantly, linking what she was doing with times that she felt good. Happiness scale 6/7. The miracle question went down the same paid employment pathway and the creation of a CV. I used the same scripts.

Session 4

Again, Emily was a little more upbeat today. Still though, there was a nervousness and disconnection about her and she seemed small, but when we got to talking of the good things she had noticed this week she was ready with a list and a smile. She was starting to play the game and was enjoying doing so. She was feeling more confident as a guide at the castle, even pushing herself to work in an area of the castle that was more busy and therefore more demanding, and the views from the castle roof were stunning. The spring flowers were blooming. She was becoming fond of the people that she worked with at the museum.

Now, she said "I feel I am starting to move through the grieving process and I'm not so terrified of life any more." Fantastic!!! Amazing!! We investigated this a little further and Emily was beginning to feel liberated from her fear. She had also contacted Cruse bereavement services, but this had one hurdle that she needed to overcome which was a fear of driving in that particular city. Happiness scale 5/6 and miracle question focused on her want to be in a town where there was more going on. So she decided that she would do an exploratory trip to a local town to see what it was like. Same scripts used.

Continued over...

Sessions 5-7

Similar sessions. Good things identified pointing out flowers and beautiful scenes that she had witnessed. She had achieved the drive to the Cruse meeting and found it the most depressing thing!

But Emily also said that it had got her down for maybe a day and then.....she corrected her own train of thought and came through the other side. She even laughed that it was the counsellors at the meeting that seemed to need the counselling. She was chuckling, her face stance, and everything beginning to open up like a blossom on a spring morning. Her miracle question answers were really focusing on what was the next step for her and how she was going to make the decision. All these things were indicative of the fact that Emily had seen the light at the end of the tunnel. Scalings 7 – 7.5 – 8. Same scripts.

Session 8

Emily came through to the consulting room. She was smiling, confident and upbeat. There was a spring in her step and a lightness in her voice. “What’s been good about your week?” I asked as usual and she responded with a list of: feeling more confident driving, feeling more confident talking to people, plus she said the confidence feels natural, it feels right like an old friend. She had been on a coach trip with some colleagues and they had generally acted like children which had made her feel wonderful. She had gone through an old photo album of her and her husband and had laughed and cried but had felt good at the end, positive. She said to me, “I know I can get there and be a normal person again.” Her scaling was 8.5 and her miracle question based around relocation again and fact finding missions. Same scripts.

Session 9

Again, obviously upbeat, Emily strode into the office and announced that she had forgotten her list of good things but could remember them and that I had better get ready to write! We laughed and I began to jot down and explore her stories. She was feeling very confident again and had accepted that life had ups and downs, but it was all about how you dealt with them. The Cruse meetings were good and she had suggested that the counsellors come to see me! She had been to a pub that held a dear memory for her of her husband and had enjoyed reminiscing about the times they had had together, relating a story about kedgeree and curry powder. She had also started to tidy the house and the garden to put it on the market. Scaling 8.5 and she was going to start drawing again by completing some sketches of her dog.

Session 10

Emily came through and her posture, visage and entire appearance was almost unrecognisable from the Emily who had walked through my door all those weeks ago. She had said it had been a hectic couple of weeks. She had got the house on the market only to decide that actually she rather liked where she lived so took it off again. Three specific things that she was proud of herself for this week were: patience in dealing with ‘testing’ people; that she was really enjoying being part of a team; that she saw a future that may not be written but was happy.

Emily felt she had dealt with the grief, come to terms with her loss and was ready to live the rest of her life. Scaling was 9/10 and her miracle question resulted in her booking a holiday with the girls to go exploring. We discussed where we were and we decided that Emily had my number and that she knew where I was if she needed me.

Each of these sessions included similar revision sections focusing on positive thought, interaction and action increasing serotonin levels, the time we spend in the intellectual mind, and reducing our levels in the stress bucket.

The chart at the bottom of page 24 shows the results of the ORS and was a fantastically helpful tool for this client.

Emily could see her own progress, she could see the incline of the curve and, from a therapist’s point of view, it allowed me the confidence to know I was doing the right thing. At week 8 we moved to bi-weekly appointments after discussion as we were in the perfect and maintain phase, and by week 10 it was clear that Emily was ready to finish the sessions as she felt we had achieved a long-lasting change.

Emily’s pathway was inspiring. To lose somebody so close to you at any age is devastating and can take a long time to deal with, but we can deal with it. Life does go on and there are blank pages in our books that are waiting for us to fill them. So, why not fill them with laughter, fun and optimism ■



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AN INTERVIEW WITH...

..MATTHEW DYSON

Where did you train and what year did you qualify?

I was on the very first course that David ran at the Clifton Practice and qualified in 2003. I say "qualified" - actually it was a lot easier in those days!

Any additional therapy qualifications (i.e. CBT etc)

No. I started a psychology degree with the Open University (I had completed an MBA with them in 1997), but got frustrated with how out of date much of the research was that they based their courses on. Like many academic psychology courses it also focused very heavily on how humans do their pathology and negative experiences rather than positive skills and strengths - not exactly solution focused!

Clinics you work from:

After the course, David invited me to work from the Clifton Practice. There were a large number of enquiries for hypnotherapy coming in and he wanted to share the workload. Talk about having it easy! I work full time at the Practice - Monday to Friday from 10am - 8pm. It's great having the flexibility to fit people in when they want, and I also suspect I get less cancellations as a result.

Workload / Number of clients a week

On average I see 12-20 people a week depending on the season, which provides enough time to pursue other interests such as marking, developing training and running courses on mindfulness and happiness.

What made you interested in studying hypnotherapy to start with?

I have always been interested in human behaviour but you could say my initial interest in hypnosis was sparked when I was 12. My father used to bring home Medicassettes (he was a GP) and I remember listening to one that described hypnosis and how you might use it to encourage a woman to take her clothes off!

Fortunately the basis for my interest became a little more sophisticated. My wife, Diana and I went to see David Newton 15 years ago to help with weight loss, which was nicely successful. When I later wanted a career change I went to see David again to see if the process could help me determine what I wanted to do next. He was setting up the course in Hypnotherapy and I signed up, mainly because I had become very interested in the subject. Needless to say, I became hooked!

What did you do before you trained as a hypnotherapist?

I was responsible for helping develop long-term strategy and implementation plans for Clerical Medical which later became HBOS financial services. It sounds a far cry from Hypnotherapy, but I was always more interested in the psychology of the interpersonal dynamics and characters in the boardroom than I was in business planning!

David Newton often says that therapists become successful because of their engaging personalities, what other attributes do you feel are important?

Staying power! Stick at it. There are times when things are quiet or difficult, and one of the key traits is that ability to see beyond the hard times and keep going. Naturally it helps if you actively want to help people and have that as your primary goal.

Do you have any Hypnotherapy or psychotherapy heroes, and why them in particular?

Apart from David (naturally!), the therapist I respect most is Michael Yapko, who writes the Trancework textbook as well as a number of books on the treatment of depression. I've been on 6 trainings with him here and in the US. The philosophy is similar to CPHT in that it is science based but very

practical. About half of the training time is spent practicing ad-lib hypnosis on other students.

Michael himself, as both a therapist and teacher, maintains a good balance between the art and science of therapy and manages to cut through a lot of the erroneous ideas that the profession has picked up over the years.

How do you get your clients? (i.e. referrals from other health professionals, advertising?)

Some clients are referred as a result of the location of the Practice and Clifton Practice advertising, but most are referrals and clients returning for more therapy. One of the key things about persevering is that the longer you're in business, the more referrals and returns you get.

Often when therapists start out they like to focus on one particular thing like weight loss, or stop smoking, but then have changed to other areas as they gain more experience. Which areas do you enjoy most now and why?

I first thought of specialising in weight management (I used to carry three stone of empathy!) because the market was significant and that's where I personally had most benefited. However, I quickly discovered that it's impossible to truly specialise other than for marketing purposes, and so have always seen anybody for everything. Partly this is because there are common threads that run through all mental health issues, but also because often when someone comes for one thing you actually need to help them in other areas as well. For example, 50% of people with depression suffer from co-morbid anxiety; someone with alcoholism may suffer depression or social anxiety, etc. Also it's nice to talk about things other than the presenting problem. I don't want to constantly talk about social anxiety to the client who comes for help with blushing, as that can over-emphasise it as a priority for them. In the same way, someone with weight issues doesn't want to be overly focused on eating and food.

This is one of the great benefits of the miracle question, which is that it is a very general question

which expands the perspective of the client and where the answers change as they go through the process of therapy.

I don't have a favourite area of therapy. I think the most enjoyable experiences I have relate to the people and characters I help and the relationship I have with them. I think it's a good discipline not to refer people to other practitioners or turn them away as it's often the more challenging cases that provide the best learning experiences.

Do you do anything else that uses your skills in hypnotherapy outside the clinic room?

Six years ago I started running an 8 week evening course in happiness for the general public. I wanted to work with groups of people and the subject was suitably solution-focused. The components of happiness have been really well researched and the process of developing the course was very enjoyable, as is the experience of running it. It turned out that the nicest people want to be happier! The course is run on similar lines to the CPHT practitioner course and uses a combination of teaching followed by break out groups who use scaling and the miracle question on each other.

From January 2015 I'm going to offer the course to AFSFH practitioners, who are considering running the course themselves or just cherry picking the material for use with clients.

Some people will give up their day jobs way too soon to pursue Hypnotherapy, what one piece of information would you have liked to have known, which you found out the hard way, before going full time?

I can't really speak from experience because I went full time straight away and benefited from clients being available through the Practice, although I do have a commercial background in business development and I used to volunteer as a Princes Trust small business advisor.

My view is that it's safer to start practicing part time because it takes some of the pressure off, but

Continued over...

it can be to the detriment of the business later on. When someone is 100% invested in making it work it can be actually be easier to achieve financial viability than when they are distracted by another job.

Having said that, a common difficulty with people who start full time is the difficulty in doing it full time! It's so easy to get side-tracked and there's a much greater need in our business to develop self regulation and self control than when we just need to be reactive to the demands of an employer.

If you could give one tip to a new graduate, what would that be?

From a developmental perspective, I would suggest reviewing sessions afterwards by thinking through what went well and what would you like to do differently next time. The greatest learning experiences for me have been from my clients. This

also helps in remembering cases for use as anecdotes with other clients.

From the point of view of your business, my tip would be to resist getting lost down rabbit holes; technologically, academically and even socially. Ensure that 80% of your available time is devoted to the core activities of seeing clients and making people aware of your services.

Finally from a personal perspective, remember to enjoy the process and make sessions enjoyable for clients, developing and using interesting stories, anecdotes and humour. When sessions are fun as well as interesting and relaxing it not only makes it more likely that clients will provide referrals and come back for more sessions, but it also increases the likelihood that you'll want to stay in the business over the long term ■

Bereavement - by Trevor Eddolls

You've probably noticed, as you walked along a beach, that, while everything seems to be staying the same, it is in fact changing. On one side of you is the sea. And you see and hear the sound of the waves with the tide coming in and going out. You can look at the blue of the sea and the white of the foam, and it's in constant motion, constant flux.

And on the other side, as you walk along, is the beach. And you can see the marks that high tides have left. You can see the different types and different colours of seaweed that have been washed up on the beach with each tide. And you might be able to see people on the beach – children playing with their brightly-coloured buckets and spades, or colourful kites, or other beach games. You can hear their squeals of delight. And you know that each day there will be different, there'll be different tides, different children – so, although you go to same beach, everything is different.

And that's the same for so much in our life, things are changing. We may change companies, or we change roles within a company. And even doing the same job can actually be different each day – perhaps different customers or other differences.

And so it is for people in our life. Old friends from when we were at school probably aren't our friends now. And it's the same with friends from our old jobs, or people we were friendly with on holiday – they probably aren't our friends now. Change happens ... and we expect it too, naturally.

But there are some changes that can be painful. It hurts us when the change occurs. And yet, at the back of our minds, we know change has to occur, even though we don't want this change to have occurred. So, what can we do? How can we be like the beach that knows the tides will sometimes come in higher, and sometimes the waves will be stormy. How can we accept the changes that have occurred? How can we realign our thinking with the way things are now?

How can we get over the feeling of betrayal when we allow ourselves to laugh, even though that loved one isn't with us to laugh? How can we overcome the feeling of betrayal when we enjoy a good meal, or a new book, or a great movie, without that much-missed person being with us?

The answer is going to be different for everyone, but, somewhere inside us all, nature, like that natural beach, knows how best to move forward, without betraying anyone. Helping us to live our lives in the best way we can. Sometimes, we need to listen to our own internal rhythms, our own internal clock, that will, quite naturally, tell us when it is time to move on. And it will help us to remember the good times, and carry those memories with us, as we experience new good times.

We know that when it's our turn to leave this world, we want our friends and families to continue to enjoy their lives without feelings of guilt. That's just natural. In our minds, we know that the beach is still the same beach, but things are naturally different there, now.

If you would like details from Matthew about the Happiness Course practitioner training weekends, please email him at: matthew@dysonthrapy.com.



LETTERS

In the last edition of the online newsletter it was mentioned that members should avoid advertising on GP's appointment cards as they're not targeted. As a student hypnotherapist who is planning to make this my full time career in future, I would like to challenge that opinion.

- The June edition of the online newsletter stated that GP's surgeries hardly ever give out appointment cards any more. This is true of some surgeries; in fact some don't offer an appointment card system at all. However, of those that still do and there are plenty, the average number even taking into account the fact that many patients don't use the surgery very often and that some call the surgery to make an appointment only once and then don't need to rebook.

- I've also heard people say; well I've never had a card from my surgery. Well that's probably true and could be for a couple of reasons, maybe your surgery is one that no longer uses an appointment card system. The other likelihood is that you are generally healthy and when you make an appointment, it is over the phone or online and one visit is enough. However, the people that we're looking for suffer from anxiety related disorders, these patients use the surgery regularly, often having repeat appointment after repeat appointment. They keep their appointment cards as a reference because they want to make sure they keep their next appointment. After all isn't that why most therapists use appointment cards themselves? This makes the GP's appointment cards extremely targeted in my opinion.

I accept that there are some dubious companies out there that sell space on appointment cards. However, I work for Neighbourhood Direct Ltd (NDL), who has been producing appointment cards for surgeries since the year 2000 and practice booklets since 1994. NDL are the market leaders in this area and as such have a number of imitators who tend not to run their business in quite an ethical way.

I know from working there that NDL always do the following:
- Only ever carry out an advertising

sales exercise and therefore reprint the cards after they have received a genuine request from the surgery for more cards.
- Never allow a GP's surgery to run out of cards, as long as they give at least 2 weeks' notice when they order more cards.
- Tend to only work with surgeries that have 3 GP's or more registered, to give advertisers a much higher potential distribution than working with the smaller surgeries. NDL have contracts with approximately 80% of all GP's surgeries that have 3 GP's or more, that operate an appointment card system.
- Deliver what they promise. In the event of an error, they will you always go above and beyond what might be expected to rectify any issues.
- Ask the surgery what businesses they would be happy promoting to their patients - GP's surgeries always have final power of veto. If they say no, you don't get to advertise no matter how much you're prepared to pay.
- Never allow hypnotherapists to have sole rights/exclusivity on a GP's publication as GP's prefer their patients to have a choice when it comes to health care in the private sector.
- Never charge you any more for the cost of any artwork and won't go to print until you're happy with your proof regardless of the number of amendments needed. All artwork is designed by a team of fully qualified graphic designers and logos are often designed free of charge when print advertising is purchased.

It's worth noting that NDL advertise their promotional opportunities through all their different surgery media including appointment cards. As a result businesses contact NDL regularly asking for an opportunity to advertise within the appointment cards of various surgeries and Hypnotherapy is the second most popular type of business to do this.

NDL offer easy payment terms allowing advertisers to pay monthly for the daily distribution of the appointment cards, with a minimum 12 month term. NDL have a large number of different health related businesses that go on to pay for a number of years, suggesting that this type of advertising does work for them.

The longest paying business so far has been

paying for 14 years and shows no sign of stopping just yet.

It is not all sweetness and light however, as I mentioned earlier there are other businesses that also sell advertising on appointment cards and they have definitely damaged the reputation of this type of promotional opportunity. In the same way you wouldn't want to be tarred with the same brush as an unethical hypnotherapist, NDL have no desire to be associated with these businesses.

So I urge you to walk away from any sales persons that offer to put you on all the appointment cards in a local area. It may be possible to put you on one or two GP's appointment cards, but it's unlikely that they will have the contract for all surgeries and as mentioned before, not all will run an appointment card system.

Some companies only deliver one batch of cards for the year and usually not very many at that. As a result advertisers will believe that this type of media doesn't work for them when their advert really hasn't been given much of a chance. They have been known to send cards to surgeries that NDL have contracts with in the hope that the surgery will feel obliged to distribute them. They will usually ask for money up front, usually three payments to cover the whole two years of their contracts. This can mean it is almost impossible to get a refund if you're not happy with your advert or the number of cards distributed. Artwork is usually designed by their sales teams and advertisers are rarely given an opportunity to approve it before it goes to print.

They often charge less than NDL but you get what you pay for! If I have managed to change your mind about NDL, then great, if you're still not convinced then I have said my piece and hopefully sometime in the future a positive experience with the right company might change it for you ■

Kind Regards

Jenny Mellenchip
SFH Student Manchester

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Don't Forget!

If you are a member of the NCH, then you can register your details of your supervisor (If they have been accredited by the NCH) with them - online. www.hypnotherapists.org

Don't Forget!

See website for more details on Supervision and CPD for different levels of membership.

Writing for Hypnotherapy Today

If you have any case studies, scripts, metaphors, book reviews, news, areas you feel we need to investigate, then don't hesitate to get in touch.

By submitting to the AfsFH journal you grant the AfsFH an irrevocable worldwide non-exclusive royalty free licence to publish in Hypnotherapy Today. You also warrant that the article is original, does not infringe copyright, and that you have authority to grant these rights to publish. Copyright remains with the author unless otherwise specified.

Submission deadlines

First day of February, May, August, & November.

Issue Dates

January, April, July & October



Chairman and Trustee: David Newton

David Newton founded the AfSFH and is an avid supporter of getting the word out to the public of what Solution Focused Hypnotherapy is all about. His inspiration brought the Association to life and has allowed us to flourish rapidly in our early days. His support of all that we do is greatly appreciated.



Trustee: Nicola Green

Nicola did a wonderful job as secretary but has had to step down, but remains a trustee. The bee in her bonnet is to support both newly qualified and experienced Hypnotherapists in their careers, so she comes up with many of the initiatives that help our members improve their businesses.



Trustee: Susan Rodrigues

Susan is our mainstay who oversees our Executive meetings to ensure we're on the right track! Her knowledge ensures that our brain waves keep to the ideals (and regulations) of the solution focused world.



Trustee: Matthew Cahill

Matthew is one of our Trustees whilst also being heavily involved in training Solution Focused Hypnotherapy. He is also a director of UKCHO which is involved with moving the hypnotherapy profession forward.



Company Secretary: David Mclean

David has moved from the research post to taking on the job of CEO. David champions solution focused hypnotherapy and is extremely keen to help to move our association forward. David says "There are some fantastic times ahead, one I'm privileged to be part of".



Journal Editor: Penny Ling

Luckily for us, Penny was in publishing before she became a full-time Hypnotherapist. Working with a team of volunteers who submit articles, Penny (amidst occasional tearing out of hair) writes, designs and produces our amazing Journal which has received unprompted and excellent feedback, and Metamorphosis which brings our articles to the attention of the public.



Marketing Officer: Duncan Little

Duncan Little's past was predominately in journalism where he worked for 15 years for various news organisations. He retrained following time as a SFH client himself and has found it useful in his quest to repeatedly run the Paris Marathon (his next one will be in April, 2015).



Treasurer: Denise Barkham

Denise has the responsibility of keeping us in line when it comes to spending money, keeping a tight hold of the purse strings and balancing our books!



Head of IT: Trevor Eddolls

Trevor, for his sins, is charged with updating the website and inspiring us with ideas to further progress the site. A challenging and key role as we grow bigger!



Head of membership: Denis Counce

Denis will be helping you to renew your membership and resolve any membership issues that you have. Before being a hypnotherapist Denis spent 30 years in IT, so knows how to switch the computer off and on to get the membership system to work. A definite plus, especially as we grow bigger.



Head of research and campaigning: Tiffany Armitage

Tiffany is excited to be joining the parts of her life together to head up the research component of the Association. Having previously studied scientific research to post graduate level, and worked training people across the globe in scientific methodologies - it is great to be able to now work to inspire and coordinate the efforts of the members of the Association to promote our valuable work.