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Introduction and Objectives

Group supervision can be an efficient way to increase allied health professionals' access to supervision (Kuipers et al 2013). However, the most effective format for the delivery of sessions is unknown.

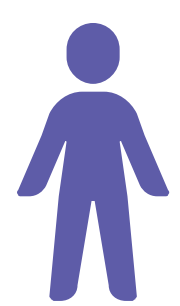
This project aimed to evaluate the feasibility and effectiveness of highly structure group supervision, utilising groups with different compositions of allied health professionals.

Methodology

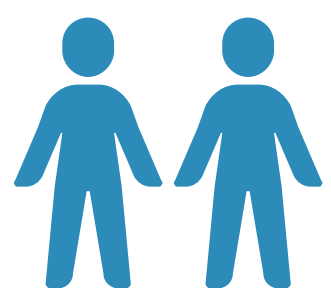
100 allied health clinicians across 12 diverse groups engaged in the group supervision program.

All participants were offered the opportunity to submit anonymous qualitative and quantitative data following each session.

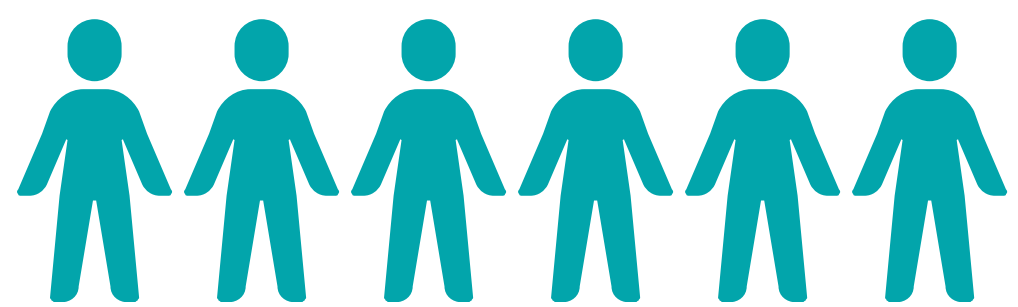
Group composition and supervision format



Presenter - participants rotated into the presenter role, bringing a situation they wished to explore. Presenters chose their preferred supervision model, from the following options: appreciative enquiry, narrative, solution-focused or reflective practice models.



Facilitator - 2 facilitators per group were trained in the structured supervision tools and group supervision facilitation skills. Their role was to guide the group through implementation of the tools, which utilise open, non-judgmental, progressive questions aimed to facilitate reflection and conclusion in the dedicated time.



Each group had 3-7 other group participants who had been orientated to the models by the facilitator. Group participants asked the pre-determined questions and engaged in reflective conversation prompted by the model.

Results

Results are from sessional evaluations, 10 months into the 12 month trial. A range of topics have been explored through the supervision models (Figure 1).

All group members have found the supervision sessions to be a valuable use of their time (Figure 2). The main benefits reported include collaborative learning, peer support and emotional wellbeing, deeper reflection and insight, personal growth and increased respect for each other.

All presenters felt safe exploring their situation in the group setting (Figure 3), with reports that the pre-determined questions minimise the fear of leading questions, judgement, or criticism. Pre-determined questions are enabling group participants to listen intently without the distraction of planning what they will ask.

Participants perceive structured sessions create an inclusive environment minimising the influence of power imbalances, and makes the reflection "less ego driven." Most challenges were experienced when participants went "off script" with "unwanted solution-giving."

A small number of participants and presenters expressed a desire for a more flexible approach and free-flowing conversation. This was outweighed by the perceived value of a structured approach on psychological safety, and effective utilisation of the allocated time.

Conclusion

The highly structured group supervision program has been well received by participants from a broad variety of groups.

All group members found the sessions to be a valuable use of their time with many comments about wanting to continue.

Further evaluation will be completed at the end of the 12 month trial, including evaluation of feasibility and interaction with 1:1 supervision.

Figure 1. Themes of group supervision sessions

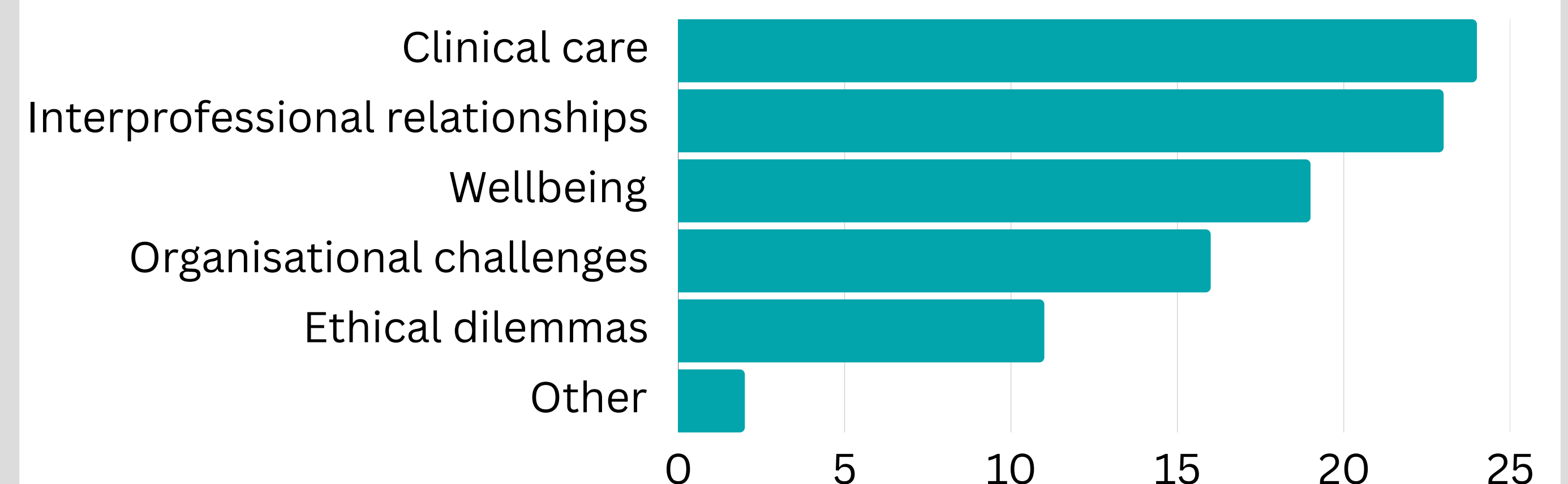


Figure 2. Self-report that the group supervision session was a valuable use of their time

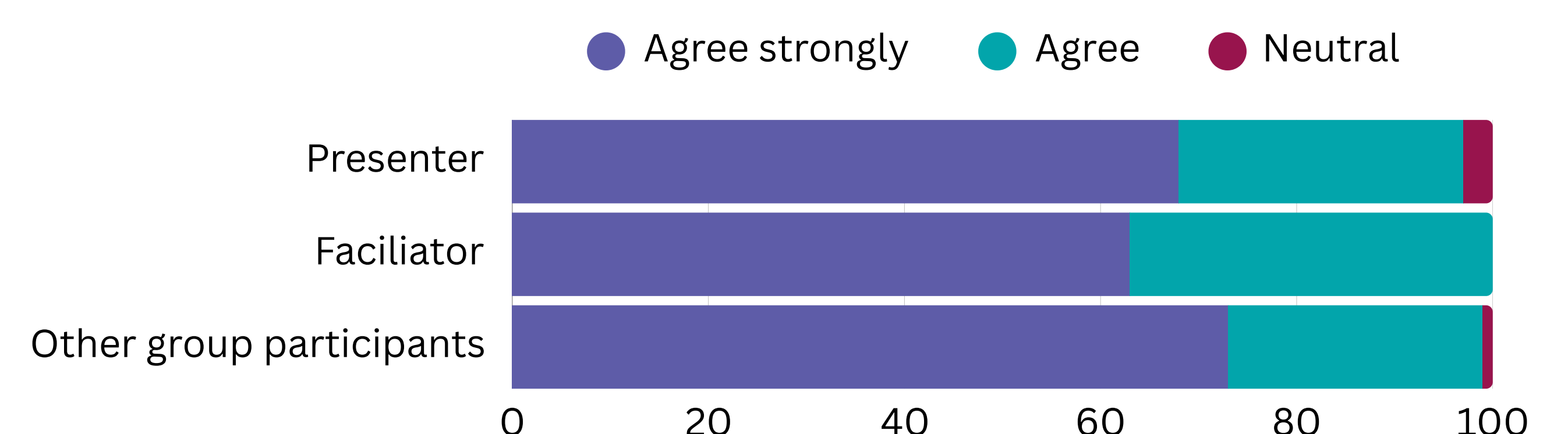
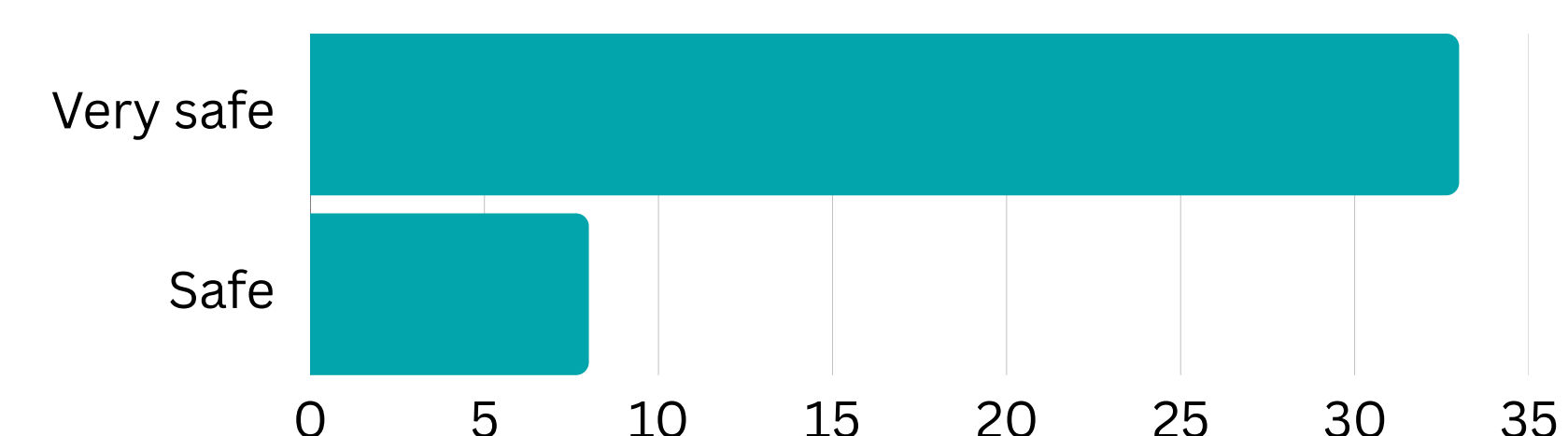


Figure 3. Feeling of safety experienced by presenter



References

Kuipers P, Pager S, Bell K, Hall F, Kendall M. Do structured arrangements for multidisciplinary peer group supervision make a difference for allied health professional outcomes? *J Multidiscip Healthc.* 2013 Oct 10;6:391-7. doi: 10.2147/JMDH.S51339. PMID: 24143110; PMCID: PMC3797632.

Acknowledgements

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