

The Power of Peer Supervision - No-One Knows As Much As All of Us

Background paper for workshop

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Overview

Peer supervision differs from more traditional forms of supervision in that it doesn't require the presence of a more qualified, identified expert in the process – a supervisor. Peer supervision usually refers to reciprocal arrangements in which peers work together for mutual benefit where developmental feedback is emphasised and self directed learning and evaluation is encouraged (Benshoff, J.M. 1992). There are a number of things that can and do go wrong if individuals are left to lead their own supervision processes and maintaining the quality and effectiveness over time is a challenge. This paper discusses peer group supervision and the factors that impact on its effectiveness, identifies common pitfalls for peer supervision groups and discusses how to maintain the quality and effectiveness over time so that the process does fulfil the purpose and functions of supervision for supervisees.

Introduction

Peer supervision differs from more traditional forms of supervision in that it doesn't require the presence of a more qualified, identified expert in the process – a supervisor. Peer supervision usually refers to reciprocal arrangements in which peers work together for mutual benefit where developmental feedback is emphasised and self directed learning and evaluation is encouraged (Benshoff, J.M. 1992). A growing body of evidence exists to support the potential contributions of peer supervision for both trainee and experienced counsellors, the latter express a preference for collegial supervision relationships, seeing them as a viable adjunct or alternative experience to traditional approaches to supervision (Hansen, Robins & Grimes 1982). In other sectors there is insufficient research to evaluate the effectiveness of peer supervision but evaluations from client organisations of the New Zealand Mentoring Centre show that it has the potential to offer valuable professional support for staff and volunteers in both the health and social service sectors.

Some of the benefits of peer supervision include increased access/frequency of supervision, reciprocal learning through the sharing of experiences, increased skills and responsibility for self assessment and decreased dependency on expert supervisors (Benshoff 1989). Peer supervision can play a valuable role in giving more people, more access to more supervision which in turn impacts on the quality of service to clients.

Not all are in favour of accepting peer supervision as a valid and credible alternative to expert led supervision processes. There are a number of things that can and do go wrong if individuals are left to lead their own supervision processes and maintaining the quality and effectiveness over time is a challenge.

How does it work?

In peer group supervision, colleagues or peers meet on a regular basis to fulfil a supervision contract. Groups can be either 'in house groups' (formed from teams or colleagues that work alongside each other on a daily basis) or inter or intra disciplinary configurations. The neutrality and privacy of external supervision arrangements can exist where groups are made up of individuals from different organisations (or areas of the organisation)

Whatever the configuration of the group, it is important that peer supervision is constructed to fulfil the 3 main functions – educative, managerial and supportive (Kadushin 1976) and that participants work together in ways that achieve the specific purpose of supervision – to enable the development of professional skills and competence in the supervisee.

Peer Supervision Groups – what can go wrong?

Peer supervision potentially has many advantages but there are a number of potential pitfalls:

- Groups could lack structure and degenerate into gossip sessions, gripe sessions, chat sessions or discussion groups
- Other demands on people's time could impact on attendance
- They may be more threatening than one to one supervision processes – people may not feel safe enough to expose their practice in a group setting
- There could be an over abundance of advice giving and other less than helpful responses
- The clinical skills within the group may not be sufficient to handle the supervisory issues involved
- The process could become diluted, collusion could be rife and the sessions could lack rigour
- People could feel criticised or demoralised
- Boundaries may be harder to maintain – confidentiality leaks, using information from peer supervision in other processes (performance appraisal)...
- Personalities or group dynamics could impact on the quality of the supervision
- Individuals may dominate and others become passive
- Ensuring there is sufficient time to meet the supervision needs of the group may be a challenge.

Without training or due attention to process, these are common occurrences in peer supervision groups.

What makes peer supervision effective? – personal reflections

I have been a member of a peer supervision group for the last 10 years which has been extremely effective in providing high quality, in depth supervision for its members. The group consists of 4 self employed trainers/facilitators who use the group for professional development, support and as a mechanism to maintain and enhance standards of practice. Attendance and commitment is high and we have had only 2 changes in members over this time. We meet once a month, for 2 hours to review our professional practice and learn from our experience.

A typical peer supervision session begins with a 'check in' round where group members signal their supervision issues, the time is divided and an agenda set. Each group member then takes a turn as the supervisee and the others **collectively** become the supervisor. The group uses a range of highly structured group processes for supervision and the session ends with a final review in order to increase the group's effectiveness and ensure that members leave 'in tact'. There is always a facilitator who keeps an eye on process, ensures the group sticks to the contract and maintains the focus of the supervisory process.

Over our time together, we have learned what factors need to be present for group based peer supervision to work and these have been reinforced in our work in training others. Keeping the quality high is the key to maintaining the momentum over time.

7 factors for effective peer group supervision

Number One: Equality

The term 'peer' refers to colleagues of equal status. In a peer supervision group no one has more or less status than any other by way of seniority, profession or experience. If one member is accountable to another in the group

(their manager or team co-ordinator) this will impact on the effectiveness of the supervision. Members need to be free to speak about their practice without restraint or concern for consequences.

Number Two: Supportive Culture

There needs to be a supportive culture within the group for peer supervision to work. The underlying assumptions that 'people do the best they can with the resources they have' and 'it's OK to make mistakes' need to be present. The degree of effectiveness of the peer supervision is directly related to the degree to which supervisees feel safe in sharing their incompetence in front of their peers and thus exposing themselves to their learning edges. The need to be seen to be competent in front of others will limit the effectiveness of the supervision so a non-competitive environment needs to be created where all have the freedom to be honest in an environment which is free from judgement.

Number Three: Structure

This approach to peer supervision is highly structured. The structure provides the leadership that an appointed supervisor would usually bring. The structure also creates safety and assists members to maintain appropriate boundaries. Participants on training courses initially find the discipline of the structure challenging but quickly see its effect in terms of the quality of supervision. A range of structured supervision tools are used and a high quality of supervision is gained in relatively short amounts of time.

The supervision tools involve analysis of both successful and challenging incidents, issues and dilemmas. Some involve structured questioning, others involve the sharing of practice and most involve feedback.

Number Four: Place a high value on turning up

Peer group members need to display a considerable commitment to their group and make peer supervision a high priority when organising their time. In the health and social service sectors it is common for competing priorities (client needs) to impact on attendance.

Number Five: Super + Vision

The key to maintaining the momentum of peer supervision over time is to ensure that the supervision is of a consistently high quality and people consider it time well spent. We encourage participants to stick to the process, be bold and intuitive in their responses, ensure there is a balance of positive and challenging feedback, avoid advice giving and remember that their purpose is to promote useful self reflection and learning for the supervisee. In peer supervision groups we need to generate greater insights than individuals could generate on their own..

Number Six: Self Directed – 'you are in charge'

This model of peer supervision requires supervisees to be self directed learners, determining their own supervision needs, choosing tools that will meet them and using the group for as a resource for learning. In any one moment, the group focus needs to be the benefit of the supervisee and the group needs to take care not to stray into meeting their own needs in one another's supervision time.

The supervision tools are designed to make the most of the multiple perspectives present in a group. The integration of the different perspectives, viewpoints and ideas that emerge from the individuals present enable the supervisee to tap in to hidden resources (both their own and others) to find innovative and insightful solutions to current problems or dilemmas. This model of peer supervision works best in groups of between 4 and 8 people.

Number Seven: No 'post mortems'

This is an essential ground rule for successful peer supervision groups. It means that when the full stop is placed at the end of an individual's supervision time there is no further discussion of the issue or practice either in the group or beyond. This creates a container around the supervision material and ensures there is no leakage into other places or processes. This contributes to the safety that is essential for individuals to fully engage in this self directed process.

Conclusion

Accounts of effective peer group supervision from the literature emphasise structure and defined process. Many groups devise their own unique process but all meet regularly, have a clear agenda, assign a facilitator and stick to an agreed structure.

If processes for effective peer supervision are devised, individuals and organisations benefit through the increased sharing of practice, increased support on the job, consistency in standards of practice, greater understanding of each other's roles and improved teamwork.

It is a cost effective method for supervision and particularly useful where access to trained supervisors may be limited. It is an extremely useful tool for experienced practitioners and those who are in highly specialised fields of practice.

The aim of all supervision is to help practitioners develop their own internal, healthy supervisor which they have access to while they are working (Hawkins 1989). Peer supervision provides valuable skills building for individuals in reflective practice and promotes a learning culture in teams and organisations. It is a valuable adjunct or alternative to regular supervision and is a worthy addition to any comprehensive supervision strategy.

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