INTERPROFESSIONAL PEER MENTORING GROUPS for SUPERVISOR DEVELOPMENT

Associate Dean for Work Integrated Learning,
Faculty of Health Sciences
The University of Sydney

Topics to be covered

- Approaches, structures, goals & methods for peer mentoring for supervisor development
- Monitoring & evaluating the integration of new learning into the peer mentoring group
- Potential problems in peer mentoring and how to manage these



Approaches to peer mentoring for supervisor development

1:1- Critical Companionship

Titchen, A. (2001). Critical companionship: A conceptual framework for developing expertise. In J. Higgs & Titchen, A. (Eds.) *Practice knowledge and expertise in the health professions.* (pp. 80-90). Oxford: Butterworth Heinemann.

Group approaches

Novice/Experienced network

Bourke, N. & van Beek, C. (2010). Using mentoring and peer support in the development of new fieldwork educators. In L. McAllister, M. Paterson, J. Higgs, C. Bithell (Eds.) *Innovations in allied health fieldwork education: A critical appraisal.* (pp. 297-305). Rotterdam, The Netherlands: Sense Publications.

Critical Friends Group

Fahey, K. (2011). Still Learning about Leading: A Leadership Critical Friends Group. *Journal of Research on Leadership Education*, 6, 1, 1-35.

Reflective group supervision

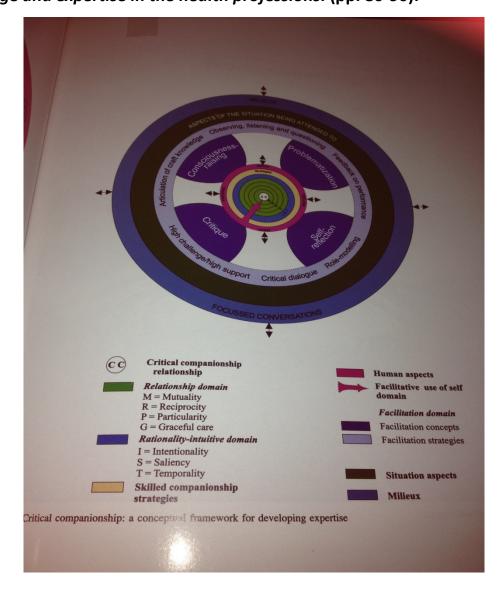
Amies, C. & Weir, S. (2001). Using reflective group supervision to enhance practice knowledge. In J. Higgs & Titchen, A. (Eds.) *Practice knowledge and expertise in the health professions.* (pp. 135-141).Oxford: Butterworth

Critical Companionship Model

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Oxford: Butterworth Heinemann.

- Relationship domain
- Rationality-Intuitive domain
- Skilled companionship strategies
- Human aspects (facilitative use of self domain)
- Facilitation domain
 - Facilitation concepts
 - Facilitation strategies
- Situation aspects
- Milieux



- Relationship domain
 - M=mutuality
 - R=reciprocity
 - P=particularity
 - G=graceful care
- Rationality-Intuitive domain
 - I=intentionality
 - S=saliency
 - T=temporality
- Skilled companionship strategies
- Human aspects (facilitative use of self domain)

- Facilitation domain
 - Facilitation concepts
 - Self-reflection
 - Problematization
 - Consciousness-raising
 - Critique
 - Facilitation strategies
 - Observing, listening & questioning
 - Feedback on performance
 - Role modeling
 - Articulation of craft knowledge
 - High challenge/high support
 - Critical dialogue



Novice/Experienced Network of Supervisors

- Novices with Experienced Supervisors
- Novices with Novices Supervisors
- Experienced with Experienced Supervisors
- Different groupings have different <u>purposes</u>
 - Novices with Experienced- role modeling, teaching, support
 - Novices with Novices safe sharing, supporting, asking the 'stupid questions' of each other
 - Experienced with Experienced safe sharing/debriefing, support, development of expertise
- Bourke, N. & van Beek, C. (2010). Using mentoring and peer support in the development of new fieldwork educators. In L. McAllister, M. Paterson, J. Higgs, C. Bithell (Eds.) *Innovations in allied health fieldwork education: A critical appraisal.* (pp. 297-305). Rotterdam, The Netherlands: Sense Publications.

Critical Friends Group

- based on a theory of action that holds that educators learn the skills of professional community by participating in structured conversations in which they are encouraged to collaborate, share and reflect on practice and focus on teaching and learning
- help practitioners learn to collaborate, be reflective, give and receive useful feedback by using structures that intentionally ask them to collaborate, reflect, and share practice

Structure

- Every meeting begins with a "check in"-group sets aside time to reflect on a thought, story, insight, question, feeling they are carrying with them into the session; then relate this to the work they are about to do in the group.
- The group uses an agreed **Protocol** (e.g., the Consultancy Protocol) to discuss a dilemma of practice, get feedback on some professional work or look collaboratively at some student work.
- Every meeting ends with the members 'checking out', reflecting on the meeting and what has been learned.

CFG Consultancy Protocol

Structured conversation that follows 6 discrete steps.

- 1. presenter offers an overview of their dilemma and the context in which it is situated; ends their presentation with a question for the group to consider.
- 2. The facilitator guides the group through a series of questions starting with very specific, clarifying questions. Clarifying questions have very brief, factual answers and are designed to help the group understand the context of the dilemma.
- 3. The facilitator asks the group for more probing questions—questions that ask the presenter to do more analysis or expand their thinking about their dilemma. The group does not discuss the presenter's answers.

- 4. The presenter remains silent while the group discusses the dilemma and the presenter's question. The group might, for example, reflect on what they heard, what they thought the real dilemma might be, or what assumptions might influence the dilemma. Sometimes, a group offers concrete suggestions; other times, the discussion centers on constructing a more robust understanding of the dilemma.
- 5. The presenter reflects on what they heard and what resonated during the discussion.
- 6. Finally, the facilitator asks the group to reflect on its enactment of the protocol.

School Reform Initiative. (2010). *School Reform Initiative Resource Book.* Bloomington, IN: School Reform Initiative.

Reflective group supervision

- 5 stage process
 - The presentation
 - Reflective questioning
 - Group discussion
 - Presenter's feedback
 - Summing up

Amies, C. & Weir, S. (2001). Using reflective group supervision to enhance practice knowledge. In J. Higgs & Titchen, A. (Eds.) *Practice knowledge and expertise in the health professions.* (pp. 135-141).Oxford: Butterworth

The presentation

- Interaction that went well/badly
- Incident where things did not go as planned
- Example which captures approach to supervisor's practice
- Example of what is demanding about supervisory practice

Reflective questioning

- Clarifying questions that establish the context of the presenter's example
- Inquiring into the actions & intentions of the presenter
- Inquiring into the effects of the situation on the presenter
- Getting in touch with assumptions & values
- Questions to locate practice in relation to workplace culture
- Questions to locate issues discussed in a broader theoretical or sociopolitical context

Group Discussion

- Questions stimulate private reflections of members
- Reflective discussion that 'honours' presenter's experience
- Don't offer advice or problem-solving
- Group members reflect on how the issues presented might effect them and their practice
- Discuss how the presenter's example & this discussion contribute to group members' thinking about their own practice
- Look for applications from presenter's example to wider context

Presenter's feedback

- Presenter gives feedback to the group about their questions and discussions in previous 2 stages
- Presenter further clarifies points raised by group
- Presenter may ask questions of group about points made
- Presenter comments on what useful/not useful to them

Summing up

- Whole group reflects on assumptions for future teasing out; or issues or themes for future CPD or application to practice
- Consideration given of links between practice and theory relevant to the presenter's example
- Review of atmosphere (e.g., of trust), ground rules and processes for group
 - If needed

Learning Activity 1

- With the people next to you (3-4 people) outline an interprofessional peer mentoring supervision development program that would work for you, given issues like:
 - Your work context
 - Rosters
 - Time availability
 - Different professions involved
 - Differing stages of development as clinicians and as supervisors

Goals of Professional Development for Supervisors

- HETI & HWA
- 2. Model of the lived experience of being a clinical educator
 - McAllister (2001) [Used in: McAllister, 2005; Higgs & McAllister (2007)
- 3. Competencies for supervisors: Knowledge, skills and attributes [Kennedy-Jones, 2005]

1. Knowledge	5. Commitment to own ongoing development
2. Supervision Management Skills	6. For Group Supervisors
3. Supervision Intervention Skills	7. For Senior Organisational Managers
4. Traits or Qualities	

Dimension 1: A Sense of Self Dimension 2: A Sense of Relationship with **Elements: Others** Having self-awareness and self-knowledge **Elements:** Having self-acceptance Being people-oriented Having a self-identity Perceiving others Choosing a level of control Values in relating to others Being a lifelong learner •Seeking to implement values and perceptions in relating to others **Dimension 3: A Sense of Being a Clinical Dimension 4: A Sense of Agency as a Clinical Educator Educator**

Dimension 3: A Sense of Being a Clinical Educator Elements: •Understanding of role •Motivations for becoming a clinical educator •Desired approaches to clinical education •Affective aspects of being a clinical educator •Motivations for becoming a clinical educator •Desired approaches to clinical education •Affective aspects of being a clinical educator •Motivations for becoming a clinical educator •Desired approaches to clinical education •Affective aspects of being a clinical educator •Designing, managing, evaluating learning programs •Managing self •Managing others

Dimension 5: Seeking dynamic self-Dimension 6: Growth and Development: Possible Stages and Pathways congruence **Elements** 1. Embarking on the journey of becoming a clinical educator •Bringing a higher level of attention to role Drawing the selves together 2. Moving from novice to advanced beginner Striving for plan-action congruence 3. Developing competence in the role McAllister (2001) Dimensions & Elements of 4. Pursuing professional artistry the Experience of Being a Clinical Educator 5. Suffering burnout

Setting Goals for Professional Development for Supervisors

SMART goals

S Specific

M Measureable

A Achievable

R Realistic

T Timed

or CREATIVELY set goals? (Fish 2005)

C Contributory to a culture in which professionals are more in Control of their practice

R Reflective practice-focused

E Educationally focused and Enquirybased rather than management-driven

A Accountable, giving rich accounts of practice

T Transformative of the practitioner's understanding of practice

Interprofessionally agreed

V Values-based

E Evaluable by humanistic enquiry

L Linked to quality of care through staff development

Y Yielding of high motivation to busy professional

Stages of Reflection

Scanlon, J. M. & Chernomas, W. M. (1997) Developing the reflective teacher. Journal of Advanced Nursing, 25(6), 1138–1143.

Awareness	Critical Analysis	New Perspective
Discomfort Excitement Curiosity	Self-awareness Description Critical analysis Synthesis Evaluation	Changed conceptual view New understanding Increased self-awareness Integration

Learning Activity 2

 As an individual, write down 3 goals you would like to achieve from an IP peer mentoring supervision development program.
 What sort of data would you collect to help you monitor progress towards these goals?

Methods for use in Peer Mentoring & Supervision Development Groups

Structured Reflective Conversations

- Questioning to promote higher order thinking and reflecting (Bloom's Taxonomy)
- Dialogic Peer Learning (Julie Baldry Currens 2010)
- Feedback [refer to earlier session on giving effective feedback]

Promoting higher order thinking & reflecting

- Questioning approach
 - Open->closed
 - Funneling
- Question types to elicit higher order cognitive responses
 - Bloom's Taxonomy
 - » Recall/remembering
 - » Understanding
 - » Applying
 - » Analysing
 - » Evaluating
 - » Creating

'Upping the anti' with probing questions

Bloom's level	Qns to elicit reflection & thinking at this level
Recall/remembering	
Understanding	
Applying	
Analysing	
Evaluating	
Creating	

Dialogic Peer Learning

Questioning

- Group members (novices) work together to answer the simple questions, and construct more precise high level questions they need input into answering from more experienced supervisors

Clarifying

 Thinking aloud with peers to reframe and make sense of ideas, situations and concepts

Exchanging

Sharing/trading resources, knowledge, skills

Rich, co-constructed dialogues

Probing & challenging assumptions, perspectives & cognitive conflicts

Baldry Currens, J. (2010). Preparing for learning together in fieldwork education practice. In L. McAllister, M. Paterson, J. Higgs, C. Bithell (Eds.). *Innovations in allied health fieldwork education*. (pp. 309-317). Rotterdam: Sense Publications.

Learning Activity 3

- With the person next to you, recount a recent experience in supervising a student or junior staff member which 'unsettled you'.
- Your partner's job now is to use the dialogic skills and Bloom's taxonomy to ask questions to help you articulate what you thought and felt about the situation, and move from simple recall to analysis, evaluation, creating new ways of thinking about the situation, and extracting principles that you can apply to future similar situations.

Monitoring & evaluating the integration of new learning into the group

- Peer mentoring interactions should be goal focused (but only some goals can be data driven)
- Make time for regular review of learning outcomes & achievements
 - Individual reflection and review (reflective journals, review of goals & 'data')
 - Critical incident sharing (perhaps based on reflective journals)
 - Clinical educator catch-ups (Bourke & Van Beek, 2010)
 - 3 monthly group review/discussion
 - Focus groups to evaluate progress and issues (conducted by someone not in the peer mentoring group and not a workplace supervisor or manager)

Learning Activity 4

• Think back to the 3 goals for development as a supervisor you set for yourself in Learning Activity 2. How could you measure progress in these goals? What evidence could you provide to your manager who might ask about the benefits of giving you time to participate in the peer mentoring program?

Potential problems in peer mentoring and suggestions to manage these

- Not having quarantined time and managerial support
- Not having an agreed structure
- Not having agreed and operating ground rules
 - e.g., giving unsupportive, negative feedback
 - e.g., offering solutions to peer rather than enabling them to generate/explore own solutions
- Not having a shared context
- Mentors not having skills to prompt and facilitate critical thinking & reflection in peers
- Giving in to giving advice and providing solutions rather than facilitating peers' reflection & learning
- Personality dynamics
- Other??

Learning activity 5

- As a pair, review the script of a portion of a peer mentoring session (to be provided) and analyse how it could be improved to meet goals of enabling the 'mentee' to critically reflect, analyse and develop their own solutions to manage the problem.
- Write down key points you would use to rewrite the script and rehearse it with your partner.
- What ground rules for your peer mentoring group might you want to set, after reflecting on this activity?

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