Group Supervision for ward-based staff

Fromeside and Wickham Units, Blackberry Hill Hospital, Bristol

Summary

Secure Services needs to meet QNFMHS Standards for Forensic Mental Health Services: Low and Medium Secure Care (2017) <https://www.rcpsych.ac.uk/pdf/QNFMHS_Standards_2016%20(002).pdf>).

‘All staff members have access to monthly formal reflective practice sessions.

Guidance: This forum provides staff members with the opportunity to reflect on their own actions and the actions of others. This forum can also be used to discuss concerns and issues of relational security.’ (Standard 133:19)

Reflective practice was offered previously by Psychology and Arts Psychotherapies teams to Nursing staff and MDT. This was coordinated by a Psychotherapist and gradually stopped after she left AWP. Group supervision was offered as an alternate support service for Nursing staff in response to a specific situation around team dynamics on one of the wards. From that a pilot was developed and trialled over a period of ten months, September 2017 to July 2018. This was followed by a review using qualitative data collected from Supervisees and Supervisors in order to understand what worked and didn’t work in the pilot.

The rationale of the group supervision pilot was to offer an opportunity for staff to contemplate their work together within a safe and secure environment, and a place where the staff are a resource of ideas and experience for each other. The group supervision was fortnightly for ward-based staff, arranged in collaboration with Ward Managers. The provision was for: Nursing, Healthcare Assistants, Occupational Therapists & Occupational Therapy Technicians and ran alongside other staff support services.

The group of Supervisors consisted of two Medics, three Senior Practitioners, one Occupational Therapist, two Arts Psychotherapists and two Psychologists. It was agreed Supervisors would not supervise on the ward they were linked to, to provide objectivity as a Supervisor. There was monthly Supervision for Supervision to support the Supervisors.

We as Coordinators were supported with monthly supervision with a Group Analyst and met monthly with Senior Management to discuss the progress of the pilot.

We held a CPD day as part of the review of the pilot and invited a Consultant Psychotherapist to present his perspective of providing Work Reflection to staff in South London and Maudsley NHS Foundation Trust.

**Conclusion**

**What worked?**

* Devising a structure which included a learning component in which staff were able to assimilate the practice and process of Group Supervision
* Structuring high levels of support which enabled the Supervisors to provide containment to ward staff.
* As a pilot it went well: although it was small sample the feedback from Supervisees was largely positive and that it was wanted and valued

**Areas for Development**

* This provision needs time to embed, time for staff to learn and understand the value of reflection and learning
* Terminology of Group Supervision to be discussed and decided
* Not enough support on the wards so staff could attend. There are practicalities to overcome in order for this reflective space to continue
* We excluded MDT & Ward Managers which did not meet QNFMHS Standards and may have impacted on the success of the pilot

**Recommendations**

We suggest learnings from the pilot would help Secure Services form a robust and effective multi-disciplinary staff support service that addresses the following issues:

* Establish a new start date so that the provision can continue
* New coordinators need to be selected and create a working group to reinforce the staff support service
* Trust / Secure Services need to demonstrate their support for the development and delivery of the staff support service, for example to support wards so more staff can attend
* Embed the staff support service into the Health and Wellbeing Service in the Trust and a link with Senior Management
* Devise a more detailed training for Supervisors and to continue to link theory and practice in ongoing training slots.
* Schedule Supervision for Supervision fortnightly
* Schedule supervision for Coordinators monthly