

Group Reflective Practice

Reflective practice is the process of critically examining experiences and events from different perspectives and seeking to separate your own worldview and bias from this understanding. Group reflective practice is a process of discussing, questioning, planning and decision making using the expertise of team members and other professionals. The purpose is to try to collectively 'see' an event, experience or person as clearly as possible without judgement, criticism or praise. Using a group reflective practice mode for significant decisions about a child and their family or families leads to more consistent and thorough decision-making, enriched by many perspectives. The input of others helps to mitigate the danger that a 'single story' will be applied to a child or family.

You can learn more about the concept of a 'single story' in Chimamanda Ngozi Adichie, <u>The Danger of the Single Story.</u>

Reflection in a mirror is an exact replica of what is in front of it. Reflection in professional practice, gives back not what is but what might be, an improvement on the original' – Biggs, 1996 p6

Benefits of Group Reflective Practice

Group reflective practice helps:

- create a culture of critique, so that you are always improving your practice for the benefit of children
- challenge your own biases and explore a broader range of possibilities for children, families and carers
- share ideas about how to support a child, family or carer
- role model good language and respectful ways to tell people's stories
- talk about the ethical tensions and how the group's ethics are reflected in practice
- explore how you are using power in your work with a child, family or carer



- talk about what sustains you in your work, what challenges you and what keeps your hope alive
- build practice capability across the group, learning from each other's cases and discussions
- share risks by helping the team work with emotions such as anxiety that may limit practice possibilities
- practitioners to be heard and to work through difficulties in work with children.

Group Supervision at DCJ

The Department of Communities and Justice (DCJ) uses group supervision to help embed improved practice in line with their <u>practice framework</u>. Group supervision is used to both discuss individual children or families but more broadly to address issues such as administration, support, development and ethics, values and reforms. DCJ use the Minnesota Model for supervision.

Other professionals outside of DCJ can be invited to their group supervision, for example if they are case managed by a Permanency Support Program (PSP) Services Provider, you and your team leader may be included in the group supervision session. Other professionals such as Alcohol & Other Drugs (AOD) practitioners, child counsellor, Aboriginal or Culturally and Linguistically Diverse (CALD) practitioners may also be involved. Ask your Permanency Coordinator if you have a particularly complex situation with a child that you think would benefit from group supervision with DCJ. Note that some PSP Service Providers also run internal Group Supervision using the Minnesota or other models, separate to DCJ.

Key Elements of Group Reflective Practice:

There is no single way to conduct a group reflective practice. However, most models have some common elements:

- facilitation by a practitioner with the group identifying and understanding what they want to achieve from the session
- sharing dilemma's or choosing one experience to work on per session
- using respectful language, talking about a family as if they were in the room
- discussing what the group are curious or worries about as well as opportunities



- using risk statements about the worries (risks) for the children and family and the context of those worries
- identifying and discussing the strengths and protective factors assets, resources, capacities that exist within the family including research about these
- using practice skills with the facilitator drawing out how the practice and conversations could happen
- the practitioner shares their observations with the group such as where they focused or if they omitted anything
- themes are identified by the group
- the group identifies next steps future casework tasks and clear direction in response to the original purpose of discussing the family
- ideas are captured about what practice opportunities may support the caseworker or group; such as access to evidence, role playing, coaching, training, peer support or other skills development
- at the end of the session, reviewing the purpose of the group reflective supervision and answer were your needs met from the session.

Group reflective practice should happen regularly, with different members of the team sharing dilemmas in turn. The facilitator may be in a supervisory role or shared among the group. Appointing people to specific roles can help reduce the danger of 'group think' and support the perspectives of different family members to be considered. For example, someone may be the child, the mum, the dad, the carer, the devil's advocate and so on.

Models of Group Reflective Practice:

There are several clinical models group reflective practice/group supervision including:

- Kolb's Reflective Cycle
- The Minnesota Model
- Developmental Model for Reflective Practice: Borton
- Reflective Practice: Atkins and Murphy
- Learning by Doing: Gibbs
- Nuances of Reflection: Johns



- The Experiential Learning Cycle in Occupational Therapy: Pfeiffer & Ballow
- Model for Reflective Practice and Peer Supervision: Edmunds.

More Information:

Please see <u>Reflective Practice</u> and <u>Supporting Reflective Conversations Tips for Managers</u> for more information.

References:

- Edmunds, H (2010). A Model for Reflective Practice and Peer Supervision.
- http://www.brightontherapycentre.org.uk/wpcontent/uploads/2011/11/Edmunds-H-2012-Model-for-Reflective-Practice-and-Peer-Supervision-in-Mental-Health-Services.pdf.
- Biggs, J. (1999). Teaching for quality learning at university. Open University Press, Buckingham.
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