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**Abstract:** The establishment of a cross-discipline peer consultation group in regional Australia is described. An evaluation study, which explored the impact of the peer consultation on participants, using pre-group and post-group evaluation surveys along with data from an externally facilitated group evaluation session is discussed. Key findings reveal the value of access to varied modes of supervision; the importance of supervision not feeling like being subjected to surveillance; and the contribution th ...

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**Restoring meaning to supervision through a peer consultation group in rural Australia.**

Journal of Social Work Practice: Psychotherapeutic Approaches in Health, Welfare and the Community.

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## **Restoring meaning to supervision through a peer consultation group in rural Australia.**

*In this paper the establishment and evaluation of a cross-discipline peer consultation group in regional Australia is framed by the peer supervision literature and the context of professional isolation in rural practice. The evaluation study attended to the impact of the peer consultation on participants, using pre-group and post-group evaluation surveys, along with data from an externally facilitated group evaluation session. Key findings reveal the value of access to varied modes of supervision; peer consultation as a process represents an alternative to a supervision problem (the feeling of being subjected to surveillance) and encourages positive professional networks. The potential for mutually beneficial praxis to arise from sponsorship by regional universities of professional peer consultation groups also emerges from this study. The findings raise various questions for further research about contemporary workplace counselling supervision arrangements, and of what, precisely, the enjoyment of case discussions in peer consultation groups is constituted.*

**Key words** peer supervision, peer consultation, professional development, solution-focussed group supervision, academic/practice collaboration.

Counsellors work at the border-crossings of human experience and identity, which demand considerable finesse, compassion and generosity of the counselling professional. Therefore, supervision is seen to be of critical importance (Bernard & Goodyear 2004; McCarthy Veach LeRoy & Bartels 2003), and a mandatory professional obligation, for most counsellors in Australia (see Australian Health Practitioner Regulation Agency 2011). Professional practice in rural areas is notably affected by isolation (Green 2003; Krieg Mayer 2001; Miles, Marshall, Rolfe & Noonan 2004; Mundy 2008), which is not optimal for effective practice, making access to supervision even more crucial in these settings (Green 2003; Green & Mason 2002; Greenburg, Lewis & Johnson 1985; Kruger & Struzziero 1997; Struber 2004).

This article draws on relevant literature to contextualize the findings of a study of a rurally situated peer consultation group. Commentators on professional practice in rural settings, the possibilities and pitfalls of voluntary peer consultation groups and reflecting team models, implementing a therapeutic technique (solution-focussed reflecting team) in peer consultation processes, and membership and leadership considerations as they relate to managing the interference of power and competition dynamics are cited. This literature is related to our study of a peer consultation group, comprised of social work and psychology practitioners, which was established in 2011 under the sponsorship of a regional university in Australia. The objectives of the study were to; a) explore the impact of a rurally situated peer consultation group on participants' professional development, b) understand the impact of the peer consultation group on participants' professional network, c) understand what,

if any, elements of the consultation process and experience in the group contributed to participants' professional well being. Key findings and their implications for practice are discussed and, lastly, two areas for further research are identified.

## **LITERATURE REVIEW**

### *Rural social work and allied health practice, isolation and peer supervision*

Rural practitioners are particularly encouraged by Cohn and Hastings (2013) to seek out environments and clinical practices that suit and nourish their abilities, personalities, and skills. Mental health practice, which makes up a significant proportion of clinical work for participants in our study, is recognized as a burnout concern (Schaufeli *et al.*, 2009; Shapiro, Brown & Biegel 2007; Tziporah & Pace 2006), especially where professionals are isolated (Curran, Fleet, & Kirby 2006). Difficulties with retention in the rural context indicate that for rural practitioners ongoing professional networks, education and support is vital (Struber 2004; Wilks, Oakely Browne & Jenner 2008).

Peer supervision groups have long been noted in the counselling literature as a remedy to the risks associated with isolation and a support to good practice (Billow & Mendelsohn 1987; Cohn & Hastings 2013; Counselman & Weber 2004; Greenburg, Lewis & Johnson 1985; Hiller & Rosenfield 2000; Kruger & Struzziero 1997; McCarthy Veach & Le Roy 2003). These groups are

commonly referred to as peer or group 'supervision' but, in reality, are consultation groups. That is, individual group members retain the legal and ethical responsibility for their own client work.

### *Possibilities and pitfalls of peer consultation groups*

Consultation between peers is built on relationships, inclusion and exchange, as an alternative to formal supervisory structures (Sullivan & Glanz 2000). Conversely, Fine (2003) reveals that power and competition can interfere with collaborative and cooperative oriented reflecting team practices in an academic setting; interference to which peer consultation groups can also become prone. Clarity, and adherence to the agreed structure and method for working within the group is pivotal, according to Žorga, Dekleva, and Kobalt (2001). Strategies such as purposefully exposing power and competition issues; reflecting on rejected comments and ideas; focusing on the collective endeavour and its significance; and developing conscious connections among the group participants are recommended to reduce the disruption caused by power and competition dynamics. Fine cautions that good intentions alone "do not make for a more collaborative environment; the person talking-the-talk has to walk-the-talk" (p. 349). Thus, it makes sense that the centrality of a sound basis for trust is emphasised by commentators on group supervision and consultation (Greenburg, Lewis, & Johnson 1985).

*Implementing a therapeutic technique (solution-focussed reflecting team) in the peer consultation process*

Many practitioners have adapted therapeutic techniques into their clinical supervision (for example, see Fox *et al.*, 2002; Gilbert and Evans 2001; Johns 2006; in Gray and Smith (2009). In particular, the development of the reflecting team model (see Andersen, 1987, 1991, 1992, 1995) 'with its strengths and challenges' (Brownlee *et al.*, 2009, p. 145) brought new alternatives to group and peer supervision processes. Gray and Smith's (2009) supervision framework shows the usefulness of applying the therapeutic techniques of solution-focused and narrative approaches to supervision, and the use of reflective conversations and questions to enhance the strength of supervisees. Similarly, Lowe and Guy (1996) articulate a model for use of a reflecting team format for solution- oriented supervision, stressing the importance of preserving each practitioner's own practice mode within the process.

Stinchfield, Hill & Kleist (2007) propose a model of triadic supervision, acknowledging its roots in the use of reflecting teams in family therapy (Andersen 1987; Kleist 1999). The model consists of and focuses on the role of supervisee, reflection and observer- reflector, although the authors recommend that further research be undertaken to explore the benefits or otherwise to supervisees and supervisors of using this model. They suggest that comparative research on different supervision models and their outcomes is necessary (Stinchfield *et al.*, 2007).

Although there is a good deal of literature and discussion on the effectiveness of self- disclosure by reflecting teams with their clients in therapeutic contexts (Andersen 1987; Johnson, *et al.*, 1997; Haley 2002; Stinchfield *et al.*, 2007), little has been researched in regards to this practice in peer supervision reflecting team processes. More certain is evidence that the reflective team approach can be used for wider moral and political purposes (see Bacigalupe 2002) and not only influences clients for change, but also reflecting team members (Haley 2002). This suggests its positive potential for use in supervision sessions (Stinchfield *et al.*, 2007).

#### *Membership and leadership considerations*

Žorga, *et al.* (2001) urge peer supervision groups without specified leadership to establish regular internal evaluation, conducted by an outside supervisor, to monitor the process. Having the experience of being a supervisee, group leadership skills, and knowledge and experience of group dynamics are stated as optimal for group participants, who also, ideally, are employed in different organisations, to allow maximum freedom in discussing clinical and work related matters. As by Fine (2003) and Greenburg, *et al.*, (1985) good intentions alone do not create the conditions of trust necessary for avoiding the pitfalls common to group processes.

## **THE STUDY**

### *Overview of the project*

The project comprised three phases: the pre-group phase, the group phase and the post-group phase. In the pre-group phase, ethics approval was obtained, participants were recruited and their informed consent secured for the research component of the program. Consenting participants completed the pre-group survey.

Details of this phase are attached in **Appendix one**.

The active group phase consisted of five peer consultation group sessions. Each session was structured using recommendations from Lowe and Guy (1996):

- The practitioner brings case material.
- A dyadic interview occurs between a member of the group and the 'supervisee.'
- Remaining group members act as a reflective team, offering their reflections in the presence of the supervisor and supervisee after completion of the supervision conversation.
- The supervisee and interviewer consider the team's reflections.
- The roles of interviewer, supervisee and reflecting team members alternate each session so that over time, each participant experiences each role.

In this phase, on the advice of Žorga, *et al.*, (2001), an external supervisor was engaged to facilitate a focus group after the fifth meeting. An internal evaluation, including a set of questions adopted from Gilbert and Sills' (1999) model for supervision evaluation and Kadushin's (1985) rules for evaluating supervision was utilised to review the process.

Details of this phase are attached in **Appendix 2**.

In the post-group phase, participants completed the post-group survey.

### *Data analysis*

Qualitative (textual) data from the surveys and focus group were initially collated using the survey and focus group questions as constructed topic codes. After becoming familiar with the responses, a line-by-line approach was used to identify excerpts that were revealing of an aspect of the participant's experiences of the peer consultation group. Each excerpt was then assigned to one or more coding categories that captured the meaning of the excerpt. Discovery-oriented analysis was used to refine the categories into developing, significant themes.

Substantial statistical analysis on the structured data was not appropriate given the small numbers involved.

## **FINDINGS**

Six significant themes emerged from the data:

- (1) Importance of separating managerial aspects from the clinical or professional aspects of supervision
- (2) Sense of being professionally and intellectually supported by the university
- (3) Constructive collegial relationships within the consultation group
- (4) Exposure to practice diversity

(5) Isolation reduction

(6) Importance of leadership/facilitation

While study participants represented a range of age, gender, years of experience and practice settings, most addressed these six broad topics in data retrieved from the surveys and focus group evaluation.

Details of the findings, presented and framed by themes, are attached in

**Appendix three**

## **DISCUSSION**

### ***The importance of separating managerial aspects from the clinical or professional aspects of supervision***

Different organisational cultures lead to different levels of support according to organisation context, some more supportive and resourceful than others. In addition, metro-centric views dominate much education and practice theory, which is challenged in rural practice (Green & Gregory 2004).

Managerial, organisational, and professional changes in human services and counselling-related organisations have also had an impact on supervision internationally. Notably, an increased emphasis on administrative supervision, to the detriment of education and critical reflection, has developed (Blake-Palmer and Connolly, 1989; Taverner, 1989). Thus supervision is prone to becoming an accountability process, which focuses on task completion, job performance, and the use of contracts (Bruce & Austin,

2000; Coulshed 1990; Kadushin 1992; Morrison 1993; Munson 1993; Tsui, 1997, 2005). Responses from participants in our study point toward a hope that the peer consultation group may transcend these organizational erosions of supervision and make a space wherein to separate managerial aspects from the clinical or professional aspects of supervision (Erera and Lazar, 1994; Gibelman and Schervish, 1997; Payne, 1994). 'Supervision can be a way of ensuring that work is not undermined by the imperatives of organizational efficiency' (Barrett and Munford, 1994, p. 1).

Boud & Hager (2011) argue that for continuing education activities have become 'a systematised and codified set of activities that have consequences for ...continued registration, and in many cases, ...right to practice' (p. 17). These authors note the emphasis on the activity, rather than the output of the activity. The use by our participants of language such as 'growth', 'extends and pushes out', 'takes your learning further' expresses their desire to develop. Their interest in the group may simultaneously reflect conformity to a form of surveillance and their desire for more authentic, non-compulsory experiences. "Rather than assume professionals take responsibility for their own development, they have become subject to surveillance, and, indeed, self-surveillance" (Boud & Hager 2011, p. 17). Our data suggest that participants of the group sought opportunities to satisfy these yearnings for professional development in ways that offer a more authentic, mixed model of supervision and professional development.

### ***Professionally and intellectually supported by the University***

Some data from the study indicate that the university campus represents neutral territory, and an effective boundary for these practitioners between domains of professional identity, especially by the absence of hierarchical, administrative, reporting, and economic purposes. This serves to reinforce inclusivity, equality, support and intellectual freedom. The provision of a material space and academic literature also represents connections between theorists and practitioners and acknowledgement of the social and financial costs often paid by rural practitioners to maintain currency and high standards of practice.

### ***Constructive collegial relationships within the consultation group***

Some of the best possible training for practice can occur in a supervision group. Regular, constructive collegial contact is an important benefit noted by participants of the study, again reflecting the literature (e.g. Counselman & Gumpert 1993; Counselman & Weber 2004). Opportunities occur to witness mistakes made by colleagues, to observe commonalities in what is felt to be challenging in counselling work, and to normalise the self-doubts and feelings of inadequacy aroused by practice. For counsellors, whose work often remains unseen by all but the client, it is also a welcome forum for acknowledgement, appreciation of finesse, and expressions of respect.

The utilization of the reflecting team format for solution- oriented supervision (Lowe and Guy 1996) appears to have grounded the relationships in a structure that facilitates the offering of a number of different viewpoints. The choice of the Lowe and Guy model from amongst other possibilities may have

been influenced by the familiarity of solution-focussed and 'strengths-based' notions to many Australian human service practitioners (Healy 2005). This familiarity may have generated a feasible common ground for a newly- formed group with no detailed knowledge of each other's preferred models and influences. The 'reflecting team' concept (Andersen 1987; Brownlee, Vis, McKenna 2009), whilst unfamiliar to most members of the group, and therefore challenging, appealed to participants as 'different and new'. Lowe and Guy provide a clear guide for the process, including examples of questions suitable to ask at various points in the supervision, to which participants still refer on a regular basis during consultations. The arrangement involves consistent changing of roles between being 'member of reflecting team', 'supervisee', and 'supervisor', which reduces the potential for the development of a single authority and hierarchy. Participants have stated that the decision to trial the model appealed to them because no member of the group had used it previously; again, equalising the power to a shared base. Whilst personality conflicts inevitably occur in groups, the clear articulation of expectations, structure and process provide strong foundations upon which to build for the smooth functioning of the group, as will be further discussed later on in the paper.

### ***Exposure to practice diversity, and isolation reduction***

Participants in a peer consultation group may gain a great deal from every meeting, even if their own material is not discussed. Group discussions often stimulate members' thinking about the people they are working with themselves, and, as noted by Counselman & Gumpert (1993) if the group is

operating well, a great deal of reciprocity in contributions and benefits is available. One participant in the study noted that experiencing support from the peer consultation group resulted in an increase in his/her own efforts to provide informal support for colleagues at work, in a flow-on effect. As inferred above, group members' experience of collegial equality is critical to preserving a safe space for consultation. Upon that ground the professional development aims of participants need to be built and satisfied; that is, the therapeutic skills and knowledge of group members need to increase as this is their goal in attending. Through the supervision model participants can try out their own supervisory style, observe the patterns and preferred ways of working of their colleagues, and imaginatively and experientially explore new avenues and expressions of therapeutic care. As mentioned elsewhere in this paper, participants have a keen and conscientious desire for growth in their professional repertoire through conceptualising discussions about their client work; this runs parallel with their interest in an emotional level of discourse around the material. In addition to cognitive and intellectual input participants want to share the complex emotional reactions that are evoked by the people with whom they are engaging in therapeutic work. Moral support, suggestions, and encouragement to overcome perfectionistic strivings are significant benefits noted by participants to be gained from others in the group.

The isolating effects of counselling work, especially in rural settings has been previously mentioned; the potential gains in knowledge of operations within the sector, networking, friendships and sharing comparable experiences are significant antidotes to the eroding effects of isolation. The study reveals that

group members take vulnerability risks by sharing their professional lives with others in the group, but balance these by due deference to personal boundaries and privacy. Our data reveal the high value placed by participants on these connections and reciprocal dynamics, and imply that the desire for learning and development runs deep in these practitioners.

### ***Importance of leadership/facilitation***

Originally, although instigated by the first author, the peer consultation group was envisaged as a leaderless group, as befitting a mutually educative group of seasoned professionals. However, perhaps due to feeling responsible for the study component of the group which ran during its establishment phase, and because the group contained a combination of early career and more seasoned practitioners, facilitation was assumed by the first author. Overt leadership functions such as steering the negotiation of participants' expectations (for instance, two group members made it clear during the negotiating discussions that they were not signing up to discuss personal matters and others that revelations of workplace politics should be avoided) soon gave way to more practical and procedural tasks. The data reveal, however, that participants cherish the presence of a leader to 'hold' the group and preserve a kind of sanctuary for participants, set apart from their every day professional obligations which typically involve high levels of responsibility for attending to the needs of other people. Words such as 'facilitation', 'sharing' and the phrase 'not in expert role' indicate, nevertheless, their preference for a non-hierarchical concept of leadership for their group.

Regarding the role of group leadership on a more implicit level, overestimating the potential for vulnerability and defensiveness triggered by direct exposure of one's work to other practitioners in a supervision group would be unwise. This reality requires the establishment of an atmosphere and process that is psychologically safe and recognises that shame is a major issue in supervision: "Many psychotherapists have strong and sometimes harsh superegos. When they appear to themselves to have failed their clients-or are less than perfect in their own eyes- they are extraordinarily unforgiving and extremely vulnerable to shame" (Counselman & Gumpert 1993). The structures and assumptions of group supervision require careful attention to this hazard, and finesse in allowing the group's processes to address such issues both directly and indirectly. Often these feelings can be very effectively detoxified through vicarious experience in the group (Alonso & Rutan 1988b). Because our data indicate participants' sense of being comfortable, included, supported and welcome in the group it is safe to infer that leadership and facilitation of the group has permitted the containment of problematic feelings and expressions of self as acceptable. Importantly, counselling practitioners tend to be skilled in creating safe spaces for other people and are alive to signs of insecurity or feelings of inadequacy, intuitively contributing to easing these reactions wherever possible. It is to be expected that as the group matures the basic task and maintenance functions will be more implicit, mutually managed by the group and maintaining the energy for creativity and reflection will be investment held by the entire group.

Finally, an assumption underlying the leadership of this group is that as far as possible, participants should not feel coerced to attend the group consultation. To this end, 'apologies' given are always acknowledged with statements which 'give permission' for participants to attend very much as it suits them (or not). This assumption is based on the idea that being 'required' to attend would produce a different group. Regrettably, in retrospect, collection of data around this assumption was not included in the study design.

### ***Limitations and Areas For Further Exploration***

Sample size and a specific arena of practice limit the generalizations possible from this study. Content and manner of data collected from participants was inevitably influenced by the professional relationships between themselves and the first author, a methodology highly vulnerable to bias.

Some areas for further exploration emerged. Participants in our study appeared to value highly their felt sense of collegial equality within the group. Further investigation into how this was articulated in the set-up of the group, developed along the way, or taken as 'given' by participants may generate useful information. Why and how this registered as meaningful and positive is another area of interest. It may also prove useful to consider the effectiveness of specific supervisor and reflecting team behaviours in relation to supervision in this setting.

Moreover, given the interest of universities in building community capital, further investigation of the potential for sponsoring peer consultation groups for other professions could be explored.

Finally, two questions of peculiar interest, to these authors at least, arise from the findings. Participants' statements about the inadequacy of supervision arrangements in their employing agencies raise questions, for possible further research, about what occurs in contemporary rural workplace counselling supervision arrangements. Another intriguing question concerns what, precisely, constitutes the evident 'enjoyment' involved in participating in case discussions in peer consultation groups.

## **CONCLUSIONS**

Our findings confirm the concerns noted in the literature regarding the isolation felt by rural practitioners. The evidence from our study shows that the peer consultation group has considerable and positive impact on participants' professional development, and fosters improved feelings of professional connection. The peer consultation group furnishes participants with a stronger professional network and effectively supports clinical development and both personal and professional well-being. Additional findings indicate that a variety of modes of external supervision are desired by rural practitioners, who are sensitive to the accountability and surveillance agenda of managerial supervision. The significance to practitioners of what they perceive as a supportive relationship between the university and 'the field' has pertinence for further partnerships and collaborations between these two domains.

Finally, it could be inferred from our findings that professional integrity and professional identity are aspects of the lived experience of a person that are larger than the current job they occupy, and that the peer consultation, reading and discussion that occurs in the group described serves to situate the individuals and the group within a broader, reflective, professional community.

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## APPENDICES

## **Appendix one**

Pre-group phase

*Ethics Approval*

A University ethics committee approved the project. The informed consent of group participants was a requirement for involvement in the evaluation components of the peer consultation group; specifically, the focus group session and the pre-group and post-group surveys. The surveys predominantly consisted of open, qualitative questions and minimal quantitative questions for basic details (e.g. age range, professional experience).

### *Recruitment*

Participation was invited by the first author through the local branches of relevant professional bodies (Australian Psychological Society, (APS); Australian Association of Social Workers, (AASW), practitioner groups, and professional contacts of the first author. The invitation included a brief description of peer supervision, some broad guidelines for eligibility (see Žorga et.al, 2001), and offered a University seminar room as the venue. Interested respondents were invited to an open, informal information session about the first author's preliminary conceptualization of the peer consultation group, and the associated research proposal. It was made clear that participation in the study was not a requirement for group participation and membership.

### *Participants*

Participants in the pre-group survey (n=8) represented seven female and one male working in frontline service delivery roles. Two participants were under

35 years of age, three participants were aged 35-50 years, and the remaining three were over 50 years of age.

The number of participants involved in the post-group survey and the focus-group evaluation reduced to five with one male and four female participants. All participants held Bachelor degree qualifications or more (n=2). Years of experience as a counselling-related practitioner ranged from 1 year or less (n=2), to 29 years (n=1), and some (n=3) had previous careers in other professions. One participant was practicing privately, while the remainder were employed in non-government (n=1) and community services roles (n=3).

#### *Pre-group survey*

The pre-group survey consisted of twenty-three items, including open questions and some scale questions. Along with basic demographic details, participants were asked to describe:

- Current employment and previous professional experience;
- Motivation to participate in the group, expectations and understanding of peer consultation;
- Professional network and level of support;
- Experiences of a critical learning incident;
- Experiences of ethical, agency and other issues in professional practice.

## **Appendix two**

Group phase

*Group process*

Structure- a variety of options were presented to the group as possibilities for structuring the process. These included models developed by Borders (1991), Lowe and Guy, (1996), Wilbur & Roberts (in Bernard & Goodyear, 2004), and Yalom (1985). The group chose to adopt the model outlined by Lowe and Guy (1996), which positions group members as a 'reflecting team' to a revolving supervisor and supervisee dyad, utilising a solution-focused perspective to guide the consultation.

Content- prior to each consultation meeting the first author researched and provided articles pertaining to supervision, group supervision and other case-relevant material (e.g. hidden sexism in couple dynamics). These were circulated prior to the meeting and discussed in the 'warming-up phase' of each group consultation.

Reflecting team-the reflecting team is charged with the responsibility to deliberately align themselves with the practitioner's strategies, remain within these, and seek to extend them. The role of the team is to identify and build upon the practitioner's competence, affirm their struggles, and help identify future possibilities and challenges. The subject of the supervision is the therapist's work, not the client's issues. The team may adopt a teaching or consultancy role that may involve additional input to the practitioner's knowledge, skills, and brainstorming with the practitioner specific possibilities for the case.

The externally facilitated focus group evaluation session-the second author 'externally' facilitated the group evaluation session. This session sought input from participants on:

- Group process – including previous experience (if any) of peer supervision, group cohesion, leadership, practicalities, attraction and commitment;
- The format of group sessions;
- The reflective team/ role-play format;
- Likelihood of continuation;
- Suggestions for change.

Research notes were taken by the facilitator (second author) and co-facilitator (first author) during the evaluation session to capture participants' comments.

#### *Post-group survey*

The post-group survey comprised fifteen items, including some open and some scale questions, to gain an impression of the impact (if any) of peer supervision on aspects of participants' professional practice. Participants were asked to:

- Identify changes, if any, in aspects of their paid work during their time with the peer supervision group;
- Comment on rural practice and the peer supervision opportunity;
- Indicate whether or not they wish to continue using peer supervision;
- Describe their professional network and level of support;
- Comment on what might be needed from a peer supervision group over time, including suggested topics.



## Appendix three

Details of findings, grouped by theme

*Separating managerial aspects from the clinical or professional aspects of supervision.*

Participants were motivated by a desire for clinical discussion and professional development. The merits of being in a peer setting as distinct from hierarchical arrangements in the context of employment were noted frequently in the data. Additionally, for participants, agency supervision neglected the development of knowledge and skills (Krieg Mayer 2001) in favour of focussing on agency standards.

Workplace peer supervision had felt more like a chore partly due to its accounting function, competitiveness and its tips and recipes approach to intervention. I have attempted to enhance workplace peer supervision through greater encouragement and acknowledgement of positive work done. I am more tolerant of others ideas for therapeutic intervention strategies and have reflected my frustration sometimes with this is because I wanted encouragement and acknowledgment rather than a recipe.

Desire for supervision outside of workplace. Desire for peer network.

You had to choose to do it-self-determination in choosing to participate in this group- very positive and there is an open valuing of participation because of free choice.

Group structure- no obvious pecking order.

Group members' equality in that no-one was familiar with the model [used to structure the process] prior to the group, so commonality in 'newness'. Group not hierarchical like some work-based... leading to abuse.

Everyone having a chance to experience supervisee and supervisor roles has been positive.

This group's level playing field- a really lovely thing.

*Being professionally and intellectually supported by the University*

The university provided a seminar room on campus and access to academic and practice literature for discussion. Evidence from these data indicate that considerable capital for the university was accrued through this support. The campus' status as neutral but supportive territory provided relief from what Green (2003) describes as "the density of networks in rural areas [which] can

affect the ability to confidently and confidentially debrief or utilise supervision”  
(p. 217).

I am grateful that you have set up this regular peer supervision, as it is much needed in a rural area...where it is too easy to work in a vacuum. Being part of a group gives a sense of connectedness and reduces feelings of isolation which is beneficial for clients and practitioners.

It's a great networking opportunity, great for community connectedness.

I didn't realise that supervision like counselling is a broad field with extensive literature, many different approaches. This rich and complex history has completely opened my mind to different approaches to peer supervision and supervision full stop.

Thank you for providing such an encouraging professional activity. The time to grow as a social worker by reflecting on my practice is a joy.

Articles very stimulating, even the less useful ones were ok in that they offered a different perspective.

Neutral location gives an even footing for members, no-one's territory.

This has been a beautiful opportunity, not linked to workplace.

Coming out here from town is part of the separation of work/home –  
'like respite', a 'retreat'.

Feels like a serious venue where serious things happen.

### *Constructive collegial relationships within the consultation group*

Participants of peer consultation groups that are working well report that the experience involves a feeling of being understood, assisted in achieving understanding, and actively encouraged to be curious and empathic when faced with practice difficulties (Clarke, *et al.*, 2007; Zahm, *et al.*, 2008).

Sharing with others has assisted me to realize that others have similar difficulties with particular scenarios, which thus allows me to proceed with confidence as this is then normalized. A little black humour goes a long way rather than perceiving the lack of enjoyment in particular types of presentation is a failing. This normalisation then makes it easier to deal with that scenario.

Being able to discuss difficult situations has elicited commonalities in scenarios many people find challenging rather than seeing it as a failure.

Hearing of others' struggles informs of the impact of difficult cases or scenarios on their feelings and thoughts has assisted me to acknowledge and process in a more timely and reflective ways some of my own and assisted me to interact with my work colleagues around these things.

Peer supervision enables me to connect with other professional and to learn from them and for them to learn from me. We all have different experiences in our work and it helps by broadening understanding in a supportive environment.

Collegiality, professionalism and good humour of group participants.

*Exposure to practice diversity.*

Professional practice can become overly patterned and habitual through lack of stimulation and exposure to alternative approaches and methods. The findings indicated that opportunities to witness and participate in their colleagues' ideas were helpful to participants. This supports findings in the theoretical and practical literature (Kaslow & Bell, 2008; McWhirter & McWhirter, 2007) that encouraging supervisees' autonomy and fostering mutual receptivity to ideas between supervisors and supervisees is highly valued.

An opportunity to move in different directions, like string theory, noticing patterns in own style as well as others. Helps reflect on alternative approaches.

I think the biggest influence my participation in the PCG has brought is the great diversity of approaches and outlooks of therapy as well as our own personal expectation of ourselves in our professional work. I feel blessed to not feel pressured to produce outcomes.

It's nice to meet peers who practice in different sectors and understand better some other services.

It has been more focused on relevant issues of practice with good input from others. It is the first that I have attended with such a variety of therapists.

Having participants from different organisations has been helpful and complements exchange.

### *Isolation reduction*

Rural professionals can find that maintaining a professional identity is a conscious effort (Brownlee, Halverson, Chassie, 2012). Professional roles are typified by formality and detached relationships (Mellow, 2005), which in smaller communities, adds to social isolation. Pugh (2007) observes that

personal and professional relationship boundaries are problematic issues in rural practice.

Feeling connected to other therapists is especially important in a rural setting as it is easy to feel isolated- not only from training and development, resources, but from other people. The consumers benefit from connectedness of therapists in the area as we are able to work in a more collaborative manner for the benefit of consumers.

The second reason I would stay is I value commitments and I saw it as an opportunity to network with other professionals.

Peer supervision enables me to connect with other professional and to learn from them and for them to learn from me. We all have different experiences in our work and it helps by broadening understanding in a supportive environment.

The great opportunity to learn from more experienced social workers. The networking opportunity it provides.

The opportunity to learn from social workers working in different fields of work to what I am currently in.

Yes it is beneficial to understand that others have similar concerns and difficulties in providing the service in a rural area where resources are

lacking. It helps one to feel less isolated and the sense of connectedness means that I can engage in professional dialogue to gain others' perspective, refer to others if a particular area is outside of my expertise and experience, and to feel supported by others.

Useful for application to supervision and support. Useful to observe relatedness and rapport establishment. Useful in reflecting on other professionals' lines of questions and challenges. Useful to hear how supervision interventions, direction of questioning were perceived and what was found to be useful.

I love how the many different ideas/advice can arise and how welcome one feels in the group.

*Leadership: participants appreciated a facilitated group*

Counselman and Gumpert (1993) regard the role of the leader as critical to the success of supervision groups. All of the participants saw a leader for the group as necessary to 'hold' the group, one respondent remarked that the leader's style set the 'tone' of the group and all participants expressed preferences for a group culture that emphasises 'facilitation' and 'sponsorship'. The leader was also seen as carrying responsibility for the structure, interactional dynamics and focus, thus keeping the space clear for group members to attend to themselves and their reflective work in the group

comparatively free of the responsibility so characteristic of their daily work.

Responses in the focus group evaluation attributed group maintenance outcomes to the manner in which the group was led:

Leader helps to maintain focus on you and get the job done.

... a safe supportive group, sharing knowledge.

The sense of belonging.

I felt more included.

