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# Interprofessional supervision in social work and psychology in Aotearoa New Zealand

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## Abstract

The requirement of professional supervision within the health, justice and social service sector in New Zealand has increased greatly since the advent of the Health Practitioners Competency Assurance Act (HCPA 2003). As supervision is seen as a key vehicle for continuing development of professional skills, the demand for trained and competent supervisors has increased, with the resultant gap between demand and provision. One solution to this is for practitioners to seek supervision from a suitably matched professional outside the discipline. The limited literature on the practice of interprofessional supervision (IPS), suggests both advantages and limitations. This article presents the results of a survey (N=243) of social workers and psychologists practising IPS in Aotearoa New Zealand. The survey examined the rationale for seeking IPS, attention to function, and the perceived advantages and limitations for the supervisor and supervisee alike. Respondents receiving IPS reported a variety of reasons for seeking it including, but not most importantly, the lack of availability of same-profession supervisor. Respondents believed the advantages included the usefulness of different approaches/perspectives and an increase in knowledge and creative thinking. Disadvantages included that aspects of the supervisee role were not able to be adequately addressed and a lack of shared theories or language. The practice more adequately provided for the formative and restorative functions than normative despite some having IPS as their only form of supervision. Recommendations therefore include ensuring the purpose of IPS is well clarified at the outset; that it is not a standalone practice for less experienced practitioners; that professional guidelines are appropriately flexible to provide for the varied and justifiable rationales and that programmes for appropriate preparation for IPS be developed. Further research is needed, however, to further clarify the specific agenda for seeking IPS including those for whom it is not a preferred or satisfactory approach.

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There is considerable debate in the literature about the role and function of supervision in the health and helping professions. Definitions, guidelines and policies differ according to the context in which it is practised (Davys & Beddoe 2010; Milne 2009). Ferguson's (2005) definition provides a useful brief description as a starting point:

Professional supervision is a process between someone called a supervisor and another referred to as the supervisee. It is usually aimed at enhancing the helping effectiveness of the person supervised. It may include acquisition of practical skills, mastery of theoretical or technical

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knowledge, personal development at the client/therapist interface and professional development. (Ferguson, 2005, p.294)

Recent developments within the health and social service sector in New Zealand, prompted by policy at government level, have resulted in an upsurge in interest and practice of professional supervision. In New Zealand the Health Practitioners Competence Assurance Act (HCPA 2003) has led to greater uptake of supervision among health professions (see for example, Paulin 2010). This legislation aims to protect the public by ensuring that health practitioners are competent to practise. Since its implementation many professions have developed guidelines for supervision as a mechanism to promote ethical, safe practice and professional development. Professional bodies typically specify that supervision must be with someone of the same discipline.

Beyond allied health, professions that have not traditionally engaged in supervision in New Zealand such as police, clergy and specialist teachers have also begun to use supervision as a vehicle for support, dealing with the increasing complexities of their work, and critical reflection on practice (Davys & Beddoe 2010). As a consequence of this growth in interest and uptake, professional bodies have set requirements for supervision and educational programmes for supervisors. There can be obstacles in terms of those at senior levels being willing, able and resourced to move into the roles of supervisors for their junior colleagues (Rains 2007). As a result of the pressure on resources of available supervisors, some have engaged with different professional groups for supervision. Interprofessional supervision (IPS) is a growing practice (Bogo, Paterson, Tufford, & King 2001) yet from our review of the literature it appears to be under-researched. The extent of this in New Zealand is unknown, but in the USA, Berger and Mizrahi (2001) surveyed 750 hospitals and found traditional social work supervision by a senior social worker had decreased and interprofessional arrangements had increased. In her survey of social workers in Ontario, Canada, Hair (2012) found that 36% of participants had supervision provided by a variety of professionals including nurses (9%), psychologists (5%), psychiatrists (3%) and other disciplines (20%). This was despite the majority of respondents reporting the need for same-profession supervision.

While Ferguson (2005) has covered the broad functions of supervision in the definition above, at its simplest level, IPS involves two or more practitioners from different professions meeting for supervision to achieve a common goal of protecting the welfare of the client (Townend 2005). This involves supervision between members of different professions where the supervisee's learning goals include the development of competencies held by the supervisor. However, exploration of the concept of interprofessionalism in a more general sense reveals aims more broad than the enhancement of one party's expertise. Interprofessionalism often aims to foster the development of a cohesive practice between professionals from different disciplines. More broadly, interprofessional education (IPE) has been the subject of considerable development over the past decade. Reeves, et al (2010: 232) define IPE as:

An IPE intervention was defined as occurring when members of more than one health and/or social care profession learn interactively together, for the explicit purpose of improving interprofessional collaboration and/or the health/wellbeing of patients/clients. Interactive learning requires active learner participation, and active exchange between learners from different professions.

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Through interprofessional activities within a team, for example, reconciliation of professional differences and opposing views may be enabled as enhanced interaction and knowledge sharing promotes more positive relations (Hudson 2002). Interprofessional supervision thus may be seen as developing within this broader movement to foster interprofessionalism.

Typically, same-discipline supervision will address the range of formative (to do with learning and development), normative (to do with ethics and standards of practice) and restorative (dealing with the emotional effects and stress of the work) functions usually attributed to supervision (Inskipp and Proctor 1993). In IPS the supervisor and supervisee may have paired so as to be matched according to competencies related to a specific role. Davies, Tennant, Ferguson, and Jones (2004) provide an example in the United Kingdom where an interprofessional supervision strategy was introduced to support all staff working in a unit with clients who had a dangerous and severe personality disorder. The programme involved the training in and implementation of selected supervision models perceived to be appropriate for the practitioners and their work. Alternatively, mental health practitioners might seek supervision from someone from a different profession for the 'psychotherapy' aspect of their role. These forms of supervision may take a strong developmental focus on clinical skill building (Mullarkey, Keeley, & Playle 2001) and are less likely to cover matters specific to the supervisee's professional discipline, for example, role identity or development.

However, there may also be a desire for IPS based solely on practitioner choice, including criteria such as a preferred approach to supervision, or practice, or a pre-existing relationship of respect. Practitioner preference for IPS may be more likely to occur in the experienced professional where professional identity and maturity are coupled with greater awareness of areas in need of extension. The element of free choice exercised in such supervision relationships may be of significance in terms of perceived satisfaction and this may be an area for further study (O'Donoghue 2012).

IPS may also be a more common practice in small or rural communities, where potential dual relationships prohibit profession-matched supervision or there may be a shortage of trained supervisors (Crago & Crago 2002). The community may lack specialist supervisors in, for example, family therapy, or where practitioners seek advice and guidance on working across cultural differences. Specific cultural advice from a knowledgeable cultural expert may be sought where practitioners provide services to users who are culturally different to themselves (Howard, Burns, & Waitoki 2007). In these instances the primary aim is to build the cultural competence of the supervisee to work safely cross-culturally.

There are many questions as to how IPS works where there are significant differences in theoretical orientation, approach or training background between supervisor and supervisee. The small amount of extant literature provides some interesting results suggesting both advantages and disadvantages of supervision between different disciplines.

## **Advantages of IPS**

Townend (2005) studied the strengths and challenges of IPS experienced by professionals accredited as cognitive-behavioural practitioners in the United Kingdom and found several themes indicating that IPS was helpful. These included: exposure to different perspectives;

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increased creativity in supervision; exposure to wider knowledge; guarding against supervision participants becoming complacent; and the promotion of critical thinking. Mullarkey et al (2001) also suggest that the enhanced learning from IPS improves understanding of the specific contributions of different professional groups to client care. In her survey of social workers in Canada, Hair (2012) found reports that IPS can enhance professional practice despite the majority of her sample advocating for same-profession supervision.

A qualitative study of an IPE supervision course provided an opportunity to explore interprofessionalism within a group immersed in developing their supervision skills (Davys & Beddoe 2008). The study found participants believed that the IPE nature of the course reduced their unhelpful assumptions about other professionals. Such assumptions might limit communication and problem solving (Davys & Beddoe 2008). The IPE course participants reported gaining more understanding of the supervisory relationship along with greater perceptions of interprofessional competence. Žorga (2002) reports similar gains from experience in an IPS group involving managers, counsellors and educators. Participants became more able to think broadly, more familiar with the problems of colleagues and better able to take into account alternative arguments in professional decision-making.

Finally, a strategy of IPS might allow for greater choice in the selection of supervisor, especially where there are limited numbers of appropriate profession-matched supervisors available. This is a compelling point given the relationship in supervision is at the heart of effective supervision (Davys & Beddoe 2010).

## **Disadvantages of IPS**

Discussion of the disadvantages of IPS in the literature mainly focuses on differences between the professions' orientation, knowledge base and shared discourses. Townend's study found factors emerging as hindrances in IPS included: differences in professional role and training; misunderstandings; differences in level of training; the absence of shared theories and language; the absence of empathy for organisational issues; increased anxiety; and fear of revealing weaknesses (2005). Specifically, professional work issues may not be discussed due to different language, content and philosophies (Bogo, et al. 2001). In a study of experiences of IPS in an inter-cultural setting with a group of mixed health professional trainees, clinical supervisors stated they needed to adapt their practice in that they needed to have realistic expectations of the students, i.e. take a position of non-experts, ask questions and focus on participation rather than specific activities or impairment (Chipchase, Allen, Eley, McAllister, & Strong 2012). Such care in approaching IPS would seem well grounded, especially considering Howkins and Bray's (2008) point that we may be ill-equipped for IPS given that we are trained in professional silos. Supervisors will need to have developed skills in understanding differences between professionals, such as relative underlying assumptions, models of practice and professional language (Temple and Bowers 1998). Clark (2006) claims supervisors will need to have gone beyond the belief in the supremacy of their own profession (dualism), and a recognition of the existence and nature of other professions (relativism) to a position of acceptance of the value of all professions and their potential for complementarity in promoting patient care (commitment in relativism). This would facilitate engagement in a more objective exploration of viewpoints.

Concern has been expressed about the potential loss of autonomy or specificity of approach for professional groups (Hair 2012). The majority of social workers in Hair's study

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reported the opinion that they believed a supervisor should be matched so as to maintain integrity of social work practice, although 36% of them reported a non-matched arrangement. The trainees in Chipchase's study emphasised the importance of adjunctive supervision.

It is not known whether any of these difficulties arise within the IPS context in Aotearoa New Zealand, hence the aim of this project was to attempt to explore some of these issues in the social work and psychology professions in this country. The authors did not intend to test specific hypotheses, rather, the aims were exploratory. Overall, there were three broad themes that the survey attempted to investigate further:

- How is IPS applied in the psychology and social work professions? Are supervisors more likely to work externally or internally from their supervisee? How often do supervisees seek IPS? What professions do supervisors commonly belong to? The focus of this theme was to understand how IPS operates in the workplace.
- Why do social workers and psychologists seek IPS? Do supervisees seek supervision from clinicians outside their profession because they want to learn specialised clinical skills? Or, do practitioners seek supervisors outside their profession because they feel more comfortable engaging in reflective practice with an 'outsider' rather than a known 'insider'?
- What characterises the relationship between supervisor and supervisee during IPS? Do supervisors assume clinical responsibility for their supervisees' work? Is the IPS relationship more likely to be peer-based or hierarchical? Do misunderstandings arise due to differences in professional and ethical codes? What can supervisors do to prepare themselves for the unique IPS relationship?

It was anticipated that the results would provide some initial information about the IPS practice in these professions, with a view to providing direction for educative programmes and guideline development. The authors are a psychologist and a social worker, both teaching professional supervision to registered practitioners in a postgraduate university programme as well as practitioners in the field. The focus in the study on participants from these two professions is largely for convenience; however, the results do provide some comparisons between professions and more importantly between the sample of supervisees and supervisors.

## Method

Participants were recruited through an email to three professional body lists, the New Zealand Psychological Society, the New Zealand College of Clinical Psychologists and the Aotearoa New Zealand Association of Social Workers. The numbers on mailing lists were approximately 1000, 450 and 3000 respectively. The invitation sought participation from those who were engaged in offering or receiving (or both) interprofessional supervision. IPS was defined as, '...supervision with a different professional to one's own group as opposed to supervision with the same profession'. Ethical approval for the study was obtained from the University of Auckland Ethics Committee.

All respondents who completed the survey were included in the analysis as there were no further inclusion or exclusion criteria beyond the definition of participation in IPS. Over-

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all, there were 243 respondents, of whom 28.2% were psychologists and 71.8% were social workers. Various measures were taken to increase the number of psychologists participating in the survey. For example, the survey was circulated amongst personal contacts as well as being sent through various professional bodies for psychologists. However, the proportion of psychologists to social workers reflects roughly the proportions of relative number in New Zealand; numbers of practising psychologists are approximately one third of those of practising social workers.

## Survey

An on-line survey was designed to explore the questions of interest with supervisees and supervisors. The survey was open for responses over a six-week period from early January 2009 to the middle of February 2010.

The survey consisted of 51 questions and was divided into three sections. The survey took approximately 15-20 minutes to complete. An introductory cover page explained the nature and purpose of the study and provided the definition of IPS.

The first section asked general demographic, educational and professional questions. The second and third sections pertained to the experiences of supervisees and supervisors respectively. Questions were designed to gather information about the nature of IPS practice in Aotearoa New Zealand as derived from the literature above. Questions were structured to enable either quantitative numerical estimates or qualitative, open-ended responses providing greater insight into participants' personal experiences of IPS. If a participant was both a supervisee and a supervisor, the survey design permitted them to complete both sections.

In terms of the quantitative aspects of the survey, supervisees were asked about their IPS, for example, how often they attended, what profession their supervisors were, and whether supervisors assumed casework responsibility. They were also asked what their reasons were for choosing IPS, e.g. why did you choose a supervisor from another profession to yourself? Answer options included: lack of availability of appropriate supervisors; for specific skills or knowledge; positive relationship or understanding of work context. Also, whether they were peer or hierarchical relationships, internal or external to their workplace, and what they saw as advantages and disadvantages of IPS for themselves. For the latter, multi-choice options included: usefulness of different approaches/perspectives; enhances my own disciplinary skills; helps me question my institutional approach; enhances my understanding of other professional approaches; positive effect on teamwork e.g. increased collaboration; more creative outcomes; increases my knowledge; facilitates creative thinking; and other. A Likert scale was used to ascertain the extent to which they believed supervision addressed the normative, formative and restorative functions (answered on a 5-point scale ranging from 'extremely well' to 'not at all'). To address preparation for IPS issues the participants were asked what qualities a supervisor needed for conducting IPS (answered in a multi-choice format: familiarity with professional code; knowledge of each other's professional background; common theoretical base and ability to discuss professional differences and similarities; and other). Different angles were sought by asking how they believed IPS impacted upon clients and under what circumstances they believed it works effectively (both open-ended questions). Supervisors were surveyed on similar points, as well as how many people they supervised, the perceived purpose of the IPS, why they had taken up IPS, what

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they believed was needed for preparation, whether they had done a course longer than one day, and what benefits and disadvantages they saw for their supervisees and themselves conducting IPS.

Qualitative questions for supervisors included how they came to take up IPS, the disadvantages they saw for themselves, how they dealt with differences in ethical codes, under what circumstances would they not conduct IPS and whether supervision was influenced by their supervisee(s) being from a different professional group. Supervisees were asked what circumstances they believed IPS works effectively and how engaging in IPS influences their work with clients.

## **Data analysis**

Once data collection was complete at the six-week mark the quantitative responses were analysed. Data analysis was conducted through the programmes SPSS and Microsoft Excel while descriptive statistics were gained from SurveyMonkey. In terms of inferential statistics, the most commonly used statistical tests included Chi-Square Tests and Independent Samples t-Tests.

Some open-ended items in the survey enabled free responses and gleaned some greater insight into participants' personal experiences of IPS. The data obtained from these questions were subjected to a thematic analysis, results of which have been published elsewhere (Beddoe & Howard 2012).

## **Results**

### **Participants**

Overall, there were 243 respondents, of whom 28.2% were psychologists and 71.8% were social workers. There were similar numbers of supervisors (85 respondents) and supervisees (95 respondents), with a relatively high proportion of respondents who were both supervisees and supervisors (63 respondents). The sample was predominantly female (80.7%). In the total sample, the percentage of European was 68.7%, Maori 19.3%, Pacific peoples 4.1% and Asian, 2.9%. A further 13.2% of participants identified as 'Other' and under this category, participants reported a variety of ethnicities including 'Jewish', 'Indian' and 'South African'. The relationship between age and profession was not significant ( $X^2_{(4)} = 4.86, p > 0.05$ ). All of the psychologists were over 35, with 54.5% over the age of 45. Of the social workers, 66.6% of the participants were over the age of 45, however, 8.2% were younger than 35. Table one illustrates the distribution of the sample in terms of their role and seniority / title. Separate results for the supervisor and supervisee sample are not available. Finally, 54.8% of the participants lived in cities and 38.2% in provincial towns.

Of those providing supervision, 50% of supervisors had 1-2 supervisees, 25% had 3-5, 14% had 6-9 and 10% had 10-19 supervisees. The majority (90%) had attended some training of more than one day's duration, 50% had no formal supervision qualification and 16% had a postgraduate certificate or diploma.

### **The nature of the supervision**

Across both professions, the majority of supervisees (average 63%) received IPS once a month (77.3% of psychologist supervisees and 54.3% of social work supervisees). This difference

was not statistically significant ( $X^2_{(5)} = 6.063, p > 0.05$ ). Of the total sample, 21.5% received it fortnightly or weekly. More social work supervisees had IPS as their only form of supervision (47.8%) than psychologist supervisees (36.4%). Peer-based and hierarchical relationships were just as likely in each profession (59% psychologists and 49% social workers), with supervisors assuming clinical responsibility for 35.1% of SW supervisees, but for only 4.5% of psychologist supervisees (supervisee sample). The supervisor sample reported they only assumed responsibility for 20.6% of their supervisees.

**Table one.** Participants' roles (seniority).

Answer Options	Response Percentage	Frequency Count
Basic Grade to Mid-Range	16.3%	39
Advanced practitioner/senior	43.8%	105
Principal	2.1%	5
Supervisor	13.3%	32
Team Leader	4.2%	10
Practice manager/Prof Leader	14.6%	35
Academic	5.7%	14
	100%	N=240

The numbers of supervisees the supervisors reported supervising were: 1-2 supervisees (50%), between 3-5 (25%), 6-9 (14%), 10-19 (9%). The four most common professions for the supervisors were social workers (27.2%), psychologists (23.7%), counsellors (17.5%) and psychotherapists (16.7%). Across both professions, supervisees were most likely to be social workers (20.3%), nurses (17.8%), counsellors (13.9%) and psychologists (7.4%). Lesser numbers were occupational therapists, lecturers/tutors and teachers, followed by cultural specialists. A considerable proportion of supervisors (15.3%) listed their supervisee's profession as 'other'.

### Rationale for IPS

Table two below summarises supervisees' reasons for choosing a different professional for a supervisor alongside supervisors' reports of the same. For the supervisee sample, the most common reasons were for 'specific skills and knowledge' (52.4%) and 'understanding of their work context' (42.9%). Interestingly, the lack of availability of an appropriate supervisor in their profession was endorsed by 34.3% and lack of availability within a region was 12.4% of the sample. The two columns on the right (B) represent the supervisors' answers to a similar question: Why did your supervisee choose you as supervisor? The reasons reported by the supervisor sample follow similar rankings as for the supervisees, but with slightly fewer numbers reporting a lack of availability within profession or region. Supervisors reported the following: specific skills and knowledge 71.6%, understanding work context 51.4% and cultural 8.3%. The supervisors reported the lack of availability of supervisors within their supervisee's discipline as 22% or region 11.9%.

### Purpose of supervision

A wide range of purposes for their IPS were reported by the sample, with 66.7% of supervisees (combined professions) reporting that this was for 'support and personal reflection' followed by 'general oversight of clinical competency' (46.8%) and 'developing skills in a specialised area' (32.4%). Participants reported examples of skills taught during IPS includ-



ed narrative therapy, developing a psychodynamic skills base and gaining an oversight of business / team / staff management, and approximately one fifth of supervisees reported that 'ensuring cultural competence and awareness' was the main purpose of IPS. The supervisor sample also reported 'support and personal reflection' was the primary purpose of their supervisees seeking IPS (42.6%). The second most popular response (28.7%) was developing 'skills and knowledge in a specialised area'. They reported that Cognitive Behaviour Therapy was the most frequently cited skill sought. Other specific psychological skills developed during IPS included 'motivational interviewing' and 'telephone counselling for children and adolescents'.

**Table two.** Supervisee and supervisor responses on reasons for choosing interprofessional supervision.

Column A: Supervisee responses (Why did you choose a supervisor from another profession to yourself?) N= 105

Column B: Supervisors' responses (Why did your supervisee choose you as their supervisor?) N=109

Answer Options (multiple responses allowed)	A :Supervisee's response		B: Supervisor's response	
	Response Percentage	Frequency Count	Response Percentage	Frequency Count
Lack of available / appropriate supervisors within my own discipline	34.3%	36	22.0%	24
Lack of available / appropriate supervisors within my region (location)	12.4%	13	11.9%	13
The supervisor possesses skills / knowledge I would like to develop	52.4%	55	71.6%	78
I required cultural supervision e.g. Kaupapa Maori, Pasifika	18.1%	19	8.3%	9
I have previously experienced a positive relationship with this supervisor	22.9%	24	30.3%	33
Supervisor understands my work context	42.9%	45	51.4%	56

Only 3.7% of supervisors reported that the primary purpose of their IPS is 'cultural consultation'. Overall the two samples reported relatively similar 'primary purposes' apart from the ratings given to 'cultural'. The relationship between profession and the primary purpose of IPS was not significant.

### Functions of supervision

Both parties (supervisors and supervisees) were asked to rate the extent to which IPS addressed the formative, normative or restorative functions. This was answered on a 5-point Likert scale ranging from 'extremely well' to 'not at all'; these were then converted to numerical values. Again, supervisors' ratings followed the same trend as the ratings of supervisees, judging IPS as best at addressing the restorative function. They gave it an average rating of 1.90 (being equivalent to 'very well'). Similarly, supervisors rated IPS as addressing the formative function of supervision 'very well'. The degree to which IPS addresses the normative function received only the equivalent to 'somewhat'. This fits with expectations that a senior professional within one's own discipline would ideally address this function.

### Perceived advantages of IPS

For the supervisee, Table three: 'Benefits of IPS' represents their responses to the question: In what ways is your supervision advantaged or enabled by your supervisor coming from a different profession? The columns on the far right represent supervisor responses to the question: What benefits of IPS did you identify for your supervisee?

**Table three.** Supervisee and supervisor responses on benefits of IPS.

Column A: Supervisee response re benefits of IPS N=113

Column B: Supervisors' explanation of benefits N=107

Answer Options	A :Supervisee's		B: Supervisor's	
	Response Percent	Response Count	Response Percent	Response Count
Usefulness of different approaches/perspectives	76.1%	86	89.7%	96
Enhances my own disciplinary skills	40.7%	46	46.7%	50
Helps me question my institutional approach	34.5%	39	43.0%	46
Enhances my understanding of other professional approaches	44.2%	50	60.7%	65
Positive effect on teamwork e.g. increased collaboration	26.5%	30	59.8%	64
More creative outcomes	45.1%	51	59.8%	64
Increases my knowledge	64.6%	73	78.5%	84
Facilitates creative thinking	61.1%	69	65.4%	70
Other (please specify)	15.9%	18	14.0%	15

Interestingly, although these are not matched samples, the greatest difference between samples was in relation to the perceived effects upon teamwork, with 33% more supervisors scoring this item than the supervisees. More supervisors reported 'more creative outcomes' and 'enhances understanding of other approaches'. The supervisors consistently reported each potential advantage higher than the supervisees did, although overall the order of the frequency with which both groups rated the benefits was very similar. This could be either due to clear differences between these two samples (sample was unmatched) or to differences in perception between supervisors and supervisees.

### Disadvantages of IPS

When asked 'In what ways is your supervision disadvantaged by your supervisor coming from a different profession?' the supervisees and supervisors gave responses summarised in Table four: 'Disadvantages of IPS'.

The highest-rated disadvantages of IPS according to supervisors were that aspects of the supervisee role were not adequately addressed (60.8%) and the lack of shared theories or language (46.4%). By contrast, the supervisees endorsed these items to a lesser extent (34.1% and 24.2% respectively). Supervisees more frequently endorsed the items 'not all issues can be raised with supervisor' (29.7%) and 'other' (31.9%) suggesting that there may be elements of the supervisee's experience of which the supervisor has no awareness. A striking result is that only a very small proportion of supervisors or supervisees felt that 'supervision is

not time efficient due to time spent understanding differences' (5.2%, 7.7%), and 'misunderstandings arise more often' (5.2%, 7.7%). The results suggest that although supervisors and supervisees may not share a common theoretical or professional background, supervisors can relate well to their supervisees and avoid misunderstandings.

**Table four.** Disadvantages of IPS.

Column A: Supervisees' perceived disadvantages of IPS N= 91

Column B: Supervisors' perceived disadvantages of IPS N= 97

Answer Options	A :Supervisee's		B: Supervisor's	
	Response Percent	Response Count	Response Percent	Response Count
Lack of shared theories or language	24.2	22	46.4	45
Aspects of my professional role are not adequately addressed	34.1	31	60.8	59
Misunderstandings arise more often	7.7	7	5.2	5
More difficulty revealing weaknesses or doubts	14.3	13	19.6	19
Disempowerment due to professional status differences	16.5	15	18.6	18
Not all issues can be raised with the supervisor	29.7	27	6.2	6
Supervision is less time-efficient due to time spent understanding differences	7.7	7	5.2	5
My supervisor is not familiar with the ethical standards of my profession	13.2	12	19.6	19
Other (please specify)	31.9	29	15.5	15

### Qualifications and preparation for IPS

While the majority of supervisors had attended training courses that were greater than one day (89.8%), 50.5% had not obtained an official qualification in professional supervision. It is encouraging that 30.8% of supervisors held a Certificate in Professional Supervision, which is a short assessed qualification, offered through a higher education provider.

When asked what they believed a supervisor should do to prepare for IPS they responded as in Table five: Preparing for IPS, participant supervisors emphasised the importance of discussion to gain clarity about approaches, professional knowledge and differences between professional practices and codes.

The supervisees reported similarly that the supervisors needed the 'ability to discuss professional differences and similarities' (79.3%) and 'familiarity with professional code' (63.1%) and 'knowledge of each other's professional backgrounds' (63.1%) as essential skills and qualities for IPS supervisors.

### Satisfaction with IPS

Finally, how satisfied were our participants with IPS overall? Across both professions, the average rating of satisfaction for IPS was 2.04 (SD=1.25) on the numerically converted score,

which is equivalent to 'very satisfied'. Psychologists reported that they were more satisfied ( $M=1.96$ ,  $SD=1.59$ ) with IPS than social workers ( $M=2.10$ ,  $SD=0.87$ ), but this difference was not found to be statistically significant ( $p>0.05$ ). This could be due to sampling variability rather than reflecting a difference in the underlying population from which the samples were drawn. Furthermore, in relation to perceived personal benefits of doing IPS the supervisors felt that it provided a greater challenge to their disciplinary knowledge (81.3%), an increased learning about the process of supervision (72.0%) and learning about alternative work contexts (72.0%).

**Table five.** Preparing for IPS (Supervisors) N= 109.

Answer Options	Response Percent	Response Count
Discussion of the nature of supervision	91.7%	100
Clarification of limits of supervisor's knowledge / skills in relation to supervisee	91.7%	100
Discussion of shared understandings and approaches	80.7%	88
Both supervisor and supervisee are clear about responsibility, accountability, commitments and expectations	99.1%	108
Discussion about differences in power / status and how these differences should be handled	66.1%	72
A regular process for evaluating supervision sessions	85.3%	93
Discussion of differences in approach, background or values	79.8%	87
Discussion and understanding of differences in ethical codes	76.1%	83
Other (please specify)	18.3%	20

## Discussion

The findings did support lack of availability of suitably qualified matched profession supervisors as one of the primary reasons for selection of IPS, alongside seeking their specific skills and knowledge and understanding of their work context. Within this sample, it appears that those seeking and providing IPS are relatively experienced and senior in their field. For nearly half the social workers it is the only form of supervision. This, combined with the overall rating of IPS as satisfactory, and the fact that the most frequently reported purposes included support and personal reflection, general oversight of competence, as well as specific skills and knowledge would suggest that the practice of IPS should be considered a legitimate professional development strategy for these groups of professionals.

However, that the sample rated the normative function least addressed by IPS, and the frequent reporting from the sample that professional role issues could not be addressed, raises questions about the comprehensiveness of the supervision. This may be of most concern to the professional bodies that seek to implement guidelines and regulations requiring same-profession supervision and as such suggests that IPS should not be the only form of supervision or professional development activity practised, especially for beginning practitioners as was recommended by Chipchase, et al. (2012). This conclusion is supported by researchers such as Hair (2012), who found that experienced professionals emphasised the

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importance of adjunctive same-profession supervision. Supervision itself may not be the only way in which normative functions are taken care, for example, formal or informal activities or meetings within the wider context of team functioning or educational events as discussed by Bogo et al (2001). Normative concerns may be minimal in more experienced groups such as in this sample, but of primary concern for newer graduates. Guidelines would need to take into account the developmental needs of the supervisee. Further research could investigate variables that contribute to a professional's supervision needs, for example, professional development stage, alternative profession-specific development and workplace support.

In regard to advantages of IPS, supervisors gave more frequent endorsements of perceived advantages for their supervisees than the supervisee sample. This suggests that supervisors may either not be aware of supervisee experience, or that these two samples had discrepant opinions. If the former were true, supervisors would be advised to build in mechanisms for evaluating what is effective in their supervision. Such an approach would be in keeping with those who routinely evaluate session effectiveness with their supervisees (see, for example, Miller, Duncan, Sorrell, Brown, and George 2005). Overall, however, the extent of advantages endorsed by both groups suggests a strong perception of its benefits, the usefulness of a different professional approach, followed closely by building knowledge and creative thinking, these results in keeping with those of Townend (2005) and Hair (2012). There was some level of endorsement of enhancement of the supervisees' understanding of other professional approaches and a positive effect on teamwork as indicated in the literature (Zorga 2002; Mullarkey, et al. 2001). Furthermore, supervisees reported that the supervisees were able to transfer the results to their work with clients, enabling a broader range of strategies and more flexibility with difficult clients, this being a desired outcome of successful supervision.

In that supervisors reported fairly strong benefits it is recommended that senior practitioners consider IPS provision as part of continuing professional development. It has been noted amongst psychologists in New Zealand that provision of consultation or supervision to other professionals is a key aspect of their role, particularly within multi-disciplinary teams and where there are initiatives to provide greater access to psychological therapies (Gillig & Barr 1999; Earl 2010). Despite this, there are as yet few educational initiatives to prepare professionals for supervising in an inter-professional context in New Zealand.

If IPS is to continue to develop, then there is cause for supervisors to undergo specific preparation with the skills suggested by the supervisees in this study. Chipchase et al (2012) concluded that supervisors needed an understanding of the teaching and learning methods and the cultural norms used in the supervisory context of each profession. This could be somewhat achieved by the formation of specific training courses and the development of guidelines for IPS practice. The competencies targeted could include suggestions derived from this study: competence in discussing the nature of the practice of IPS; the limits of competence, responsibility, accountability, expectations; ability to facilitate discussion of power or status differences; approaches to the work or ethics or value differences. Furthermore, the practice of evaluation of supervision effectiveness, an oft-neglected procedure (Milne, Aylott, Fitzpatrick and Ellis 2008) would be recommended as part of regular practice.

Further research is needed to inform the development of guidelines for the practice of IPS; especially to consider the adoption of flexible rather than strict policies regarding

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profession-matched supervision for more senior practitioners (Beddoe & Howard, 2012). Qualitative analysis reported elsewhere suggested that IPS works best where participants had well-developed knowledge and skills, for example, political and ethical awareness, power relations, boundaries or sufficient knowledge of their supervisee's professions (Beddoe & Howard 2012). Such commentary could be seen to imply that supervisory skills and maturity are of greater importance than the actual profession of the supervisor and this is an important topic for further research. When IPS is involved, the complete provision of formative, normative and restorative functions may be best achieved by combining it with profession-specific advice and guidance.

Although the practice of IPS may potentially address resource limitations outlined at the outset of this paper, this was not a clear rationale for most of this sample. More research as to the rationale for selecting an interprofessional supervisor and the supervisory needs of a broader range of professions is required before IPS is fully recommended as a stand-alone professional development strategy. These results are positive in terms of its perceived value for social workers and psychologists, but reflect only the opinions of those providing or receiving this form of supervision. Response bias of those favourably predisposed to IPS and therefore volunteering for the survey may have contributed to the positive nature of these results. A more robust sampling procedure surveying alternative opinion would be advised in future research.

Furthermore, given the complexities of practice described in the literature and reported in this study, it would seem advisable that guidelines include procedures to obtain as much clarity about IPS at its outset as possible. This includes delineation of the purpose of the supervision, the professional development objectives of the supervisee and the specific competencies of each party including their limits. When more than one supervisor exists, clear descriptions of the purpose, function and boundaries of each should be articulated and recorded. This is ideally achieved by the negotiation of a robust supervision agreement or contract addressing potential difficulties should they arise later in IPS, a regular review of which would be advised, as mentioned above.

Further research would ideally study specific 'types' of IPS, i.e. similar purpose and function, to identify any specific advantages and disadvantages. As mentioned previously, a study of 'matched' pairs would provide clarification of whether the differences in perceptions noted between supervisor and supervisee groups were a result of sample differences or not and provide more in-depth data as to the quality of relationship, issues of power or difference, or clarity and mutuality of purpose of the IPS, for example. Alternatively, a more in-depth interview approach of groups functioning as interprofessional supervisors or supervisees may provide an appropriate methodology. Of interest also would be how IPS functions alongside same-profession supervision, how boundaries might be addressed and the content of each determined. More information is needed as to how the supervisee resolves differences between supervisors where more than one exists. Furthermore, consideration of issues that may emerge where a greater difference in the supervisee and supervisor's respective roles is found between professionals in an IPS arrangement would necessitate a study of a wider range of professionals.

## **Limitations**

The findings in this study are limited in a number of ways. Firstly, the finding that IPS was sought for many different reasons meant that the survey amalgamated otherwise disparate

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data if it were analysed according to 'type of,' or 'rationale for' IPS. Further, there were some clear differences between professions, for example, the accountability function of the supervisor was much more prominent amongst social workers than psychologists, potentially limiting conclusions.

Despite an overlap between supervisee and supervisor respondents (25.9% participated from both points of view), they were not a matched sample, thereby constraining comparisons and conclusions about differences between the groups, for example, what each group thought was the purpose and function of their IPS arrangement. However, some general conclusions were tentatively made.

The potential for selection bias also introduces a limit in that a bias may be present in the self-selected sample towards positive endorsement of IPS. Those for whom negative experiences have occurred may have opted out and therefore not be represented in this sample, nor be practising IPS. Sample limitations also exist in that this survey only included two professional groups for whom supervision practice is relatively well established. A sample of the attitudes and experiences of a broader range of professions is required to address the needs of groups newer to or who historically employ less supervision to determine whether IPS would be a useful professional development strategy for them.

## Conclusion

Overall, this survey provided the first exploration of IPS practice in Aotearoa New Zealand within the two professions of social work and psychology. The results show that IPS is relatively common in senior levels of social workers and psychologists and that it may be the only form of supervision obtained by some. Overall, satisfaction levels were high, especially in the enhancement of professional functioning. Advantages were reported by both parties and included enhancement of knowledge, creativity, critical perspectives and teamwork. However, what needs to be taken into consideration when drawing conclusions are limiting factors such as potential for response bias, the unmatched supervisor and supervisee groups, and the broad range of purpose and functions incorporated within the one survey. Recommendations regarding the need for flexibility in policy regarding IPS especially for senior practitioners, specific procedures for minimising ambiguity and maximising clarity in IPS during the supervision contract and beyond (for example, ensuring IPS participants discuss the nature, limits, purpose and effectiveness of their supervision) and the bolstering of methods for preparation for the role of IP supervisor have been made. Further research is needed to inform the development of professional guidelines, organisational policy or educational curriculum.

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