



Background

The Transcultural Mental Health Centre established the Clinical Group Supervision Program (CGSP) in 1995 to provide support, advice and guidance about clinical matters to its large and diverse pool of sessional clinicians. The Program was later expanded to include NSW Bilingual Counsellors and other clinicians providing assessment and counselling services, with at least fifty percent of their caseload being CALD clients. Supervision sessions are held monthly in groups with designated clinical supervisors who have expertise in transcultural mental health assessment and treatment. The clinical supervision program is a significant part of the TMHC professional development strategy and is instrumental in ensuring the quality and safety of mental health care and service provision.

Aims

- To promote access to free professional clinical group supervision facilitated by senior clinicians who are skilled in cross-cultural clinical practice
- To make the Program accessible by providing groups throughout the Sydney metropolitan area and in other of NSW.

Focus

- To provide support for clinicians
- To provide opportunities to examine and reflect on skills and knowledge
- To enhance professional identity
- To promote models of best practice that reflects the issues and needs of clients from culturally diverse backgrounds.

Current Structure

The CGSP currently provides 10 clinical supervision groups, with a maximum of 10 participants for each group. The groups meet once per month for two hours. The groups held in the Sydney metropolitan area meet in North Parramatta, Bankstown, Hornsby, Rozelle and Rockdale. Two groups are held outside of Sydney and meet in Wollongong and Queanbeyan.

The clinical supervision groups have either a generalist or specialist focus.

Generalist groups:

These groups consist of clinicians that have multidisciplinary backgrounds and work in a variety of settings including schools, community health, aged care psychiatry and private practice. NESB cases are presented using a broad coverage of therapeutic orientations, including attachment, cognitive behavioural, family, narrative and counselling modalities. The focus is on group discussions on theory and practice and clinical case review.

Specialist – Family Therapy group:

This group in the past has consisted of clinicians that have a multidisciplinary background and work in a variety of settings including private practice, child and adult mental health and DOCS. This group focuses on reviewing clinical presentations using a family systems framework and has examined ways to work creatively with families. There is a strong emphasis in understanding family dynamics and working towards empowering individuals and family members to work towards solving problematic emotional and behavioural presentations. The focus of this group is review of theory and the application of theory to clinical practice in clinical case review.

Evaluation

The CGSP is evaluated on an annual basis with a structured questionnaire for the participants and an annual focus group discussion and review with the clinical supervisors.

In the 2006-2007 evaluation, a number of key questions were asked to determine the impact of the CGSP. For example:

“List some of the clinical strategies, ideas, skills or information you have learnt about or further developed through the clinical group supervision program?”

The responses from the CGSP participants included:

“I found it useful to present cases and get feedback from the other participants and then discuss ideas on how to deal with difficult situations or issues, especially where I feel ‘stuck’”.

“I have improved skills to effectively negotiate with the client a treatment approach that is acceptable and effective for them”.

“I have improved my knowledge and ability in treating clients with personality disorders”.

Another question in the annual evaluations asked:

“Please comment on how attending the CGSP benefited your practice as a clinician generally?”

The responses from the CGSP participants included:

“I have increased confidence in dealing with difficult clients”.

“I have improved my knowledge and skills in looking at different therapeutic pathways and applying this when necessary to a diverse range of clients”.

“I have become more mindful of the skills and needs of bilingual counsellors, I have modified my assessment and clinical practice in cultural formulation and I have been able to share ideas and philosophies”.

The overriding feeling about the CGSP, both from participants and clinical supervisors, was that the Program worked well in providing a venue for the sharing of knowledge across disciplines and areas of clinical work, in supporting clinicians in reflective practice and providing a venue in which cultural interpretation, diagnostic dilemmas and treatment/care plans could be discussed.

Future

Future plans for the Program include expansion of the generalist and specialist groups for both the Sydney metropolitan area and for key areas of rural and remote New South Wales.