

The Collaborative Peer Supervision Group Model

Our model is based on a blend of Collaborative Office Rounds (COR)¹ and a Peer Supervision Group format initially designed for use by nurses². COR is a national ongoing continuing medical education program sponsored by the Maternal and Child Health Bureau. COR's mission is to foster pediatric-child psychiatry continuing education in the psychosocial-developmental aspects of children utilizing a case review approach. The most critical element of the nursing model is its focus on providing equal standing for all group members. This is in contrast to a hierarchical model of supervision where the supervisor is more experienced than the supervisee. The blended Collaborative Peer Supervision (CPS) group model has been used successfully by a number of OAIMH members over the past ten years. The model is well summarized in the [downloadable PDF \(click here\)](#) containing the text of our 2004 *Infant Mental Health Journal* paper.

Background

To more effectively bridge the gap between professionals who work with infants, young children, and their caregivers, we must first improve our understanding of the barriers between disciplines. Examples of the latter include preferred frequency and type of communication; how confidentiality issues are handled; talking in discipline-specific code; differences in the desired form and length of intervention as well as desired outcomes. CPS groups promote continuing professional development by expanding the diagnostic and treatment repertoires of its members. As the group matures there is a gradual development of trusting relationships that allows more personally challenging material to be discussed. Members have the opportunity to hear one another "thinking clinically" in the service of generating a collaborative plan to reinforce strengths and overcome challenges in relationships.

Objectives

1. Facilitate a more comprehensive approach to mental health as in *Bright Futures in Practice: Mental Health (BF: MH) and the Diagnostic Classification: 0-3 (DC: 0-3)*.
2. Promote collaboration between child psychiatrists, child psychologists, infant mental health specialists, nurses, part C providers, physicians and social workers.
3. Enhance power to discriminate between normal variations, transient disturbances and more serious psychiatric disorders, as in *Classification of Child & Adolescent Mental Diagnoses in Primary Care*.
4. Heighten awareness of competencies and strengthen consultation/referral to other professionals as appropriate.

Recommended Basic Elements

- A convenient location to conduct meetings
- Food--provided by an agency or individual members
- Blackboard/Flip Chart, TV/VCR, projector screen
- A provider of Continuing Education Units (CEU)
- Two moderators and 7-10 additional members

way that leads to mutual acceptance and respect. There can be times when it is more appropriate to “let go” of suggestions, allowing the presenter to proceed as they wish (adapted from Shields, 1985).

Confidentiality

The limits and scope of confidentiality should be discussed at the first organizational meeting. The highest professional standards with regard to confidentiality should be adhered to. This includes the collection and destruction of any case-based materials at the end of each meeting. There should be no discussion of case material outside the confines of the meeting.

Educational Activity

CPS groups follow a continuing education model with the primary focus being the enhancement of one’s professional development. Meetings are not to be used for billable patient hours.

Evaluation

An evaluation component is essential to verify that the group process model is effective in meeting the overall needs of the group based in part on an initial needs assessment.

¹Fishman, M., Kessel, W., Heppel, D., Brannon, M., Papai, J., Bryn, S., et al. (1997). Collaborative office rounds: Continuing education in the psychosocial/developmental aspects of child health. *Pediatrics*, 99, e5.

²Shields, J., Gavrin, J., Hart-Smith, V., Kombrink, L., Kovach, J., Sheehan, M., et al. (1985). *Peer consultation in a group context: A guide for professional nurses*. New York, NY: Springer Publishing Company.