

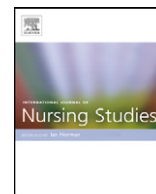


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The effects of group supervision of nurses: A systematic literature review

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ABSTRACT

Objectives: To gain insight into the existing scientific evidence on the effects of group supervision for nurses.

Design: A systematic literature study of original research publications.

Data sources: Searches were performed in February 2010 in PubMed, CINAHL, Cochrane Library, Embase, ERIC, the NIVEL catalogue, and PsycINFO. No limitations were applied regarding date of publication, language or country.

Review methods: Original research publications were eligible for review when they described group supervision programmes directed at nurses; used a control group or a pre-test post-test design; and gave information about the effects of group supervision on nurse or patient outcomes. The two review authors independently assessed studies for inclusion. The methodological quality of included studies was also independently assessed by the review authors, using a check list developed by Van Tulder et al. in collaboration with the Dutch Cochrane Centre. Data related to the original publications were extracted by one review author and checked by a second review author. No statistical pooling of outcomes was performed, because there was large heterogeneity of outcomes.

Results: A total of 1087 potentially relevant references were found. After screening of the references, eight studies with a control group and nine with a pre-test post-test design were included. Most of the 17 studies included have serious methodological limitations, but four Swedish publications in the field of dementia care had high methodological quality and all point to positive effects on nurses' attitudes and skills and/or nurse–patient interactions. However, in interpreting these positive results, it must be taken into account that these four high-quality publications concern sub-studies of one 'sliced' research project using the same study sample. Moreover, these four publications combined a group supervision intervention with the introduction of individual care planning, which also hampers conclusions about the effectiveness of group supervision alone.

Conclusions: Although there are rather a lot of indications that group supervision of nurses is effective, evidence on the effects is still scarce. Further methodologically sound research is needed.

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What is already known about the topic?

- Clinical supervision is a popular strategy in nursing to identify solutions to problems, improve practice and increase understanding of professional issues.
- Some previous literature reviews have been conducted, but most of these reviews had a narrative rather than a

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systematic character and/or were restricted to a specific time frame, a specific target group or a limited number of countries.

What this paper adds

- This systematic review demonstrates that there is some evidence, albeit limited, that group supervision in combination with the introduction of individualised care planning positively affects nurses' attitudes and skills and nurse–patient interactions in dementia care.
- Evidence for the effectiveness of group supervision in other fields of nursing care is even more limited, despite two decades of extensive experience with clinical supervision for nurses.

1. Introduction

Since the early 1990s, clinical supervision has been on the nursing agenda in many developed countries (Faugier and Butterworth, 1994). Nursing professional bodies – such as the Nursing and Midwifery Council and the Royal College of Nursing – consider clinical supervision as a supportive way to facilitate learning from experience.

Clinical supervision in nursing is defined in this paper as an activity that brings skilled supervisors and nurses together in order to reflect upon their practice. This kind of supervision aims to identify solutions to problems, improve practice and increase understanding of professional issues (NMC/UKCC, 1996). Although other definitions of clinical supervision also exist in the nursing literature (Cummins, 2009), essential to almost all definitions is that the concept of clinical supervision encompasses support, development of practice and reflection. The overall goal of clinical supervision is to improve the way professional caregivers practice their profession and thus also to improve the care of the patients (Hansebo and Kihlgren, 2004).

There are two main modes of supervision: one-to-one modes in which a single supervisor provides individual supervision for another practitioner; and second, group modes either with identified supervisors or with colleague practitioners sharing the responsibility for providing each other's supervision (Bro Morgannwg NHS Trust, 2006). Clinical supervision has an established role in the support of professionals, and its supporters suggest that it has many positive effects. It is said, for instance, to prevent stress and burnout, and to contribute to job satisfaction (e.g. Arvidsson et al., 2001; Bedward and Daniels, 2005).

In Great Britain in the 'nineties, a national programme evaluating individual and group supervision initiatives was started (Butterworth et al., 1998, 1999). Likewise in Scandinavia several large supervision projects were conducted in the 'eighties and 'nineties. However, a literature review of Hyrkas and colleagues concluded that the research published between 1988 and 1997 failed to show the precise effects of group and individual supervision because of a lack of scientific rigour in most of the underlying studies (Hyrkas et al., 1999). Another literature review, by Williamson and Dodds (1999), focussed on the

effects of group supervision, particularly on stress amongst nurses. On the basis of eight European studies, all published between 1994 and 1997, Williamson and Dodds likewise pointed to a lack of methodological rigour.

A more recent review was conducted by Brunero and Stein-Parbury (2008), and indicated that clinical supervision provides peer support and stress relief for nurses, and promotes professional accountability as well as skill and knowledge development. In addition, Butterworth et al. (2008) performed a literature review to offer an analysis of themes and trends arising from the literature on clinical supervision for nurses. These authors concluded that individual and group supervision have become an established part of nursing, and also pointed to the potential benefits that clinical supervision may have for nurse and patient outcomes. Another recent literature review was performed by Buus and Gonge (2009). These reviewers focussed on research about the effects of clinical supervision in psychiatric nursing and were less positive in their conclusion than Brunero and Stein-Parbury (2008) and Butterworth et al. (2008). Buus and Gonge (2009) concluded that clinical supervision in psychiatric nursing was commonly perceived as a good thing, but that there was limited empirical evidence supporting this claim.

As shown above, several literature reviews have previously been conducted. However, some of these reviews date from many years ago (Hyrkas et al., 1999; Williamson and Dodds, 1999), and hence do not involve recent research. In addition, the majority of earlier reviews had a very specific scope, for instance, on a selection of countries (the Hyrkas-review and the Williamson and Dodds review), a specific health care setting (the Buus and Gonge review), or a specific time period (Brunero and Stein-Parbury, 2008). Moreover, the majority of the previous reviews were narrative in nature (the Buus and Gonge-review is a positive exception in this regard), rather than meeting established criteria for *systematic* reviews (e.g. Moher et al., 2009, 2010). This may have led to bias and to too positive conclusions about effects, since in narrative reviews conclusions of underlying studies are summarised without systematically looking whether these conclusions are based on solid research.

Hence the main objective of our literature review is to provide a systematic and contemporary review of research on the effects of clinical group supervision of nurses, taking account of the methodological quality of the studies reviewed, and without imposing restrictions regarding countries, health care settings, languages or time periods.

The systematic review presented here only focusses on group modes of supervision, since the authors of this article had been involved in a Dutch project on group supervision (De Graaff and Francke, 2005), and were therefore eager to know the effects measured in other studies on group supervision of nurses. Another reason for the exclusive focus on group supervision concerns the substantial differences between the two modes of supervision. In contrast to individual supervision, group supervision provides the opportunity for peer support, to interact with colleagues and to offer support to one another in professional growth.

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