

Reflective Practice in homelessness services

An introduction

Let's end homelessness together

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Introduction

This document is a starting point for managers of homelessness services who are new to the idea of reflective practice, and want to improve how they deliver services and support their staff. It sets out a simple introduction to the use of reflective practice.

What is reflective practice?

Reflective practice describes an individual or team taking time to think about their role, including what is going well, what is difficult, how they are feeling, and how they make others feel.

This approach comes naturally to some people and forms part of their working style, but for others it will be a new way of working that needs a new skill set. To achieve consistency across teams, managers should introduce reflective practice as a distinct approach, and put in place ways to evaluate progress and impact across teams.

Reflective practice can be used by individuals or between colleagues, either one-to-one or as a group session. For example, after an incident the team might be asked to reflect on what their role was in the situation, how they felt, how their actions or words had an impact on the people around them, what else was going on for the people involved, and how alternative approaches might achieve different outcomes in future. This is in contrast to a more traditional approach to an incident debrief, where the focus is on establishing what happened and deciding what to do as a result e.g. which rules were broken and which sanction to issue.

Reflective practice can be informal and take place within existing teams and resources, by allocating time and developing the skills of staff to reflect on their role. Alternatively, managers might decide to commission an external facilitator to deliver group or one-to-one sessions. Another option is to introduce a psychological framework to underpin the work of the organisation, using training and facilitation to support reflective practice alongside other changes. The choice of approach depends on the size of the organisation and the resources available. As long as there is leadership to embed reflective practice in the organisation, you'll be able to find a model of reflective practice that works for your service.

What are the benefits?

Staff who participate in reflective practice become more conscious of how they are working. This awareness enables them to try different approaches, based on the needs of the person they're working with, and accept that they might not always get things right first time. This helps to improve morale, by giving people more conscious control over how they interact with others, and encouraging them to explore their emotions (both positive and negative) in response to these interactions.

When staff are reflecting on their own practice, they will also be reflecting on the actions, responses and emotions of the people they are working with (whether as colleagues or clients). They become more aware of their impact on others. This is crucial for supporting people, especially people who have experienced complex trauma and might find it harder to build trust and safety within a relationship. Staff who work in a reactive way are more likely to resort to rules-based responses in the face of challenging behaviour or disengagement e.g. issuing a warning, closing a case, or using phrases such as 'hard to reach' and 'burned their bridges'. A reflective practitioner considers what causes might be underlying the situation and if there are things they are doing which are unhelpful. They will consult with others to aid this reflection, and test new approaches. This leads to improved outcomes for the people receiving support, as the worker takes greater responsibility for their role in the relationship and has greater confidence in their ability to solve problems.

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Staff who feel more empowered – who can draw on a range of working styles and see things from other people's perspective – are better able to cope with the negative emotions or experiences that might otherwise lead to low morale and burn-out.

Over time, organisations that embed reflective practice and use the learning to make wider changes to their service delivery, see benefits such as:

- Reduced levels of staff absence
- Fewer incidents and evictions
- A more collaborative workplace culture, which enables co-production
- Increased engagement
- Increased positive outcomes
- Improved staff morale

The case studies below, from Riverside Care and Support and Liverpool YMCA, illustrate the measurable benefits of using reflective practice, both in terms of staff morale and client outcomes.

What are the challenges?

This approach is easy to overlook in busy environments, as reflection requires quiet time to explore the potential of individuals and teams to do things differently. Managers must be ready to set aside time for reflective practice and to act as a role model by taking a reflective approach to their own work.

Reflective practice can be uncomfortable, as teams are asked to look how their actions, communication and feelings have an impact on how people engage with the service. This challenges the assumption, common to many homelessness organisations although rarely articulated, that staff teams are somehow neutral: there to facilitate support, and to enforce rules and procedures, without having any impact as individuals. A reflective approach starts from an acknowledgement that the relationships will always be two-way, and that the support we provide – or the response we give in difficult situations – is shaped by who we are, not by organisational policy alone.

Taking a reflective practice approach often leads to wider changes across an organisation, for example using alternatives to warnings, as teams look for ways of working more flexibly with people. This can be a challenge if managers haven't understood the potential for reflective practice to change service delivery. Managers need to be ready to make changes to policies and procedures in order to empower teams as they identify new ways of working.

Support workers who are used to taking a rules-based approach might struggle at first with reflective practice. Where there is a culture of responding to challenging behaviour and complex needs by following procedures (i.e. "if x happens, the consequence is y"), being asked instead to pause and consider their own role in an incident, and to accept that they might have contributed to the problem, can be met with resistance. Staff may feel that they are being blamed, that disclosing emotions or weaknesses will be used against them, or that their safety is not being taken seriously. Managers need to be clear about why they are introducing reflective practice and how it will benefit staff. External facilitation can help to allay some concerns, as it creates a safe space where people can make disclosures, separate to line management and performance management structures.

How much will it cost?

The cost will depend on which model you choose to adopt:

- in-house with or without training
- regular external group supervision
- training and supervision to embed reflective practice across the organisation

Reflective practice can be introduced into an organisation at no financial cost if staff already have the relevant skills. We recommend that at least one manager is trained in reflective practice in order to oversee and evaluate the organisational approach.

Even without financial cost, resources of time and space will be required. Most homelessness services are busy environments, with high staff caseloads and a lot of reactive work, so managers must ensure that time and space is created for reflection as an organisational priority. Existing structures can be used, such as supervision or team meetings, as long as care is taken to allocate and protect time for reflective practice so that teams aren't drawn back into reactive work (which may well feel more comfortable and useful for them in the early stages).

Commissioning an external facilitator for reflective practice is relatively low cost for smaller organisations, with Homeless Link hearing about charges in the range of £60-100 for a monthly group session.

Alternatively, services can choose to train a group of staff and managers to lead reflective practice groups internally.

Organisations introducing a psychological framework across the organisation, alongside external supervision and training, will need to budget for higher costs according to size of staff team and use of external expertise.

Psychologically Informed Environments

Psychologically Informed Environments (PIEs) are services that are designed and delivered in a way that takes into account the emotional and psychological needs of the individuals using them. The PIE framework consists of:

1. Developing a psychological framework allowing services to have a shared understanding of, and response to, the people they support
2. The physical environment and social spaces are adapted to improve the space available to engage and support people in the service
3. Staff training and support which enables workers to move away from crisis management and work in a more therapeutic and planned way
4. Managing relationships in order to help staff and clients self-manage their emotional and behavioural responses to triggering events
5. Evaluation of outcomes to enable staff and clients to evaluate their effectiveness, for ongoing development, and to evidence service impact

Reflective practice is a core element of PIE, both within service delivery and evaluation. Please see below for resources about turning your service or organisation into a PIE.

Reflective Practice: A trainer's perspective

Psychotherapy for Healthcare

We are a small company, offering training to healthcare and care professionals, including those working in the homelessness sector. Training in facilitating reflective practice is one of our flagship workshops, and we have seen an increasing number of attendees who work in organisations that support homeless people. From initially offering reflective practice as a clinical service, we started to observe a need for professionals to learn how to facilitate reflective practice themselves, therefore the training component has now become central to our work.

In line with the greater awareness within all care professions of the importance of staff well-being, quality of staff/service-user relationships and psychologically informed environments, we have seen a need within the homelessness sector for a culture of reflective practice to be nurtured, and a keenness amongst staff to be effectively trained to support this.

As well as trainers, we are psychotherapists and our training offers a unique combination of practical skills and theory with grounding in our psychotherapeutic experience. So, as well as teaching the reflective practice theory that is generally used in the care professions (e.g. Gibbs' reflective cycle (1988)), we consider with attendees the therapeutic nature of reflection, the capacity of a facilitator to contain (or hold) a group's emotions, and ideas around 'being with' others in their uncertainty rather than providing solutions.

Reflective Practice in the homelessness sector

There is an emotional cost when working in the homelessness sector. Helping people who have considerable need and sometimes experiencing traumatic situations inevitably has an impact on the person. It makes sense for people working in the homelessness sector to at times experience inner conflict, uncertainty and a range of challenging emotions. The process of reflective practice recognises this, and works with it. It is a process of **looking out** at a particular issue within practice, **looking in** and exploring the emotional, psychological and behaviour response to this and **looking out** at how this new awareness can make a difference to subsequent practice.

We summarise reflective practice as follows:

- Reflective practice is the process of **learning through and from experience** towards gaining new insights of self and practice.
- Reflective practice '*enables us to **know what we are about** when we act*' (Dewey, 1933).
- Reflective practice enables **self-care** and **service-user-care**.
- Reflective practice facilitates **professional development** and **safe, compassionate** practice.
- Reflective practice highlights the importance of **feelings** in development and learning.

Reflective practice can occur in a variety of forms. For example, informally with colleagues, in self-reflection (thinking things through or journal writing), and in supervision. Our training champions **facilitated reflective practice groups**, as groups encourage team cohesion, support, normalisation and a sense of safety. It can be a powerful experience for staff to share their different experiences, thoughts and feelings, to be heard by one another and to offer and receive insight.

The reflective practice facilitator

Training people in reflective practice involves exploring the models, theory and process of reflective practice, but the central component is in effective **facilitation**. To be an effective reflective practice facilitator requires certain skills and qualities, especially in creating an environment of safety, trust and openness for the reflective practice process to occur. In essence, this is about developing a **relationship** between the facilitator and the reflective practice group members.

In creating a certain kind of relationship, our training draws attention to the presence of the facilitator, in terms of body language, manner and tone, as well as what a facilitator might say. The facilitator's role is to stimulate a group process of exploration and support rather than to be an 'expert' and find solutions to the particular difficulties group members bring. It can be challenging for a facilitator to hold this position, especially when it might be in conflict with the 'doing' and 'knowing' that is prized in their organisation. It might take time for a group to settle into this experience of tolerating uncertainty, staying with difficult feelings and not always having an answer to a problem. If a facilitator is able to model this, the group will follow, which in turn develops a capacity in them to tolerate the distress and uncertainty of the service-users they are working with.

Reflective practice groups might be facilitated by someone internal or external to the organisation. We have often discussed with attendees the challenges of a team manager facilitating a reflective practice group and how this role conflict might make the creation of a safe and non-judgemental space more difficult. One large homelessness organisation planned for managers to facilitate reflective practice for other teams they didn't directly manage. Managers can still effectively facilitate reflective practice groups for their own teams but the role conflict might need to be thought about and spoken about with the group members.

Examples from the homelessness sector

It has been a pleasure meeting people who work in different homelessness organisations and hearing a variety of examples of why reflective practice is necessary in their workplaces. A selection of these:

- Staff working in a homeless hostel where there had been physical violence between service-users and sometimes directed at staff. Feelings of fear and helplessness around this.
- Staff working in a homeless hostel where a service-user died. Requiring the support of other team members and an exploration of their particular response to the incident.
- Staff working in a supported housing team experiencing anxiety around dealing with angry service-users.
- High levels of demand on services and staff feeling drained, burnt out and undervalued.
- Staff feeling curious or concerned about a pattern of responses they have had to service-users, or a particular service-user.
- Staff feeling they have lost sight of their original motivation for working in this sector, experiencing a detachment from their work and wanting to connect with themselves again.

Facilitated reflective practice groups can provide a space for such examples to be safely explored and processed, with a potential positive impact on future practice. The reflective practice cycle may not necessarily be completed in one meeting, but an ongoing process might be facilitated in which an individual gradually gains greater self-understanding and uses this to be a more integrated, aware and present practitioner.

From our experience, people working in the homelessness sector tend to be reflective. They have chosen to work in organisations that involve supporting people in need and therefore they have the capacity to witness

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and work with the distress of others, which requires a high level of resilience, self-awareness and compassion. As well as being reflective practitioners, this also means people in the homelessness sector can be extremely effective reflective practice facilitators. Therefore, our training does not necessarily ask attendees to learn new skills and competencies, but encourages them to draw on the knowledge, experience and qualities they already have, and provides a framework for putting these into practice in a useful and valuable way.

Dr Sarah Simpson, Counselling Psychologist
Psychotherapy for Healthcare
www.psychotherapyforhealthcare.co.uk

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What does reflective practice look like in services?

As outlined above, there is no one 'right' way to implement reflective practice in an organisation. You'll need to work out the best approach for your team and local context. The case studies below are included to illustrate how different homelessness and supported housing providers have adopted reflective practice.

Case study: Providence Row

Providence Row works with more than a thousand homeless and vulnerably housed people a year in East London, offering an integrated service of crisis support, advice, recovery and learning and training programmes. Over the past few years the organisation has been through considerable change, including working to become a more psychologically informed service. In 2015 Providence Row decided to pilot reflective practice sessions for staff to support development and awareness across the workforce.

The optional sessions were offered to all frontline staff, and 12 individuals were interested in participating. They were divided into two groups, mixing up teams to give a spread of services within each group. Two 90 minute sessions of reflective practice were arranged to take place every six weeks at a cost of £60 per session. The pilot was for six months.

The external reflective practice facilitator is a qualified psychotherapist with experience of clinical supervision, who had been providing mindfulness sessions to Providence Row's clients. Prior to each session staff were provided with some questions in order to prompt reflective thinking.

Initially the response from staff was mixed. Despite wanting to attend, some were keen and engaged and others were more apprehensive. However, after a couple of sessions most staff reported finding reflective practice really useful and so this has been taken forward through bi-monthly 'Journal Club' meetings. This is run by the Learning and Wellbeing team, where each staff member takes it in turns to research a social psychology journal, which is circulated for reading prior to the meet up. Journal choices stem often from the group's previous discussions, assisting staff to further reflect on their own practice, consider new ways to approach their work and create a useful resource for future staff.

www.providencerow.org.uk/

Case study: Riverside Care and Support

Why Reflective Practice?

Riverside Care and Support published its Supported Housing Strategy in 2014, which committed all support services to deliver services in a psychologically informed way. Riverside had already conducted some pilot studies into homelessness services developing a Psychologically Informed Environment (PIE) approach, and the learning from these helped shape the strategy and subsequent tools and approaches developed which support staff to work in this way.

One of the key areas of working in a PIE is the facilitation of reflective practice. Whilst many services have sought to evolve, develop and learn for many years in an attempt to secure better outcomes for customers, this had sometimes been rather ad-hoc and unstructured, responding to serious incidents or lack of hitting key performance indicators (KPIs) rather than a more proactive approach. It had also often failed to scrutinise staff beliefs, thoughts and behaviours as instigators or inflators of challenging behaviours or disengagement of customers.

Approach

Riverside's Supported Housing Strategy committed to the delivery of reflective practice as a method to improve the management of relationships and also the appropriate delivery of staff support (two key areas of PIE). Throughout 2015, Riverside's Learning and Development team worked with operational colleagues who were qualified Cognitive Behavioural Coaches, as well as external practitioners, to create a training programme for managers to learn to facilitate reflective practice. The course was delivered in early 2016, enabling support teams to have reflective practice sessions on a monthly basis. The approach based on Cognitive Behavioural Coaching was chosen as this is the psychological model that Riverside has based its entire PIE approach on. Cognitive Behavioural approaches are backed by scientific measures and outcomes, and so are evidence based, and coaching is a natural part of support work (as opposed to therapy because we are not a clinical setting).

Outcomes

The delivery of Reflective Practice has not yet become consistent in all services. Due to staff turnover, there are some teams whose managers have not yet received the training. We also have undergone a significant internal restructure which has a natural impact on staff engagement and motivation and therefore sickness, absence and turnover. These are things expected to reduce when RP is regularly delivered, but cannot be identified at present due to these other internal changes.

However, teams which regularly receive RP report a greater sense of team cohesiveness and consistency of the PIE approach being delivered. For the most complex customers who typically have much shorter stays, creative and bespoke solutions are found as RP encourages staff to use a real individual focus rather than a process driven one. So the outcomes for customers which have improved (tenancy sustainment and support outcomes) can at least partially be attributed to the implementation of RP.

One staff outcome which has been noticed is levels of engagement. Our 'Best Companies' survey understandably showed reduced areas of engagement because of the restructures and redundancies in many of our central/shared services, however a consistent area of improvement was the 'my manager' score, where staff report feeling supported by their line manager and having trust in their abilities. This is a clear indicator that, despite areas of discontent to be expected with a significant restructure, that staff felt within their immediate teams that they were supported and valued.

Feedback from staff

“Since we have been using more positive language, elastic tolerance and a coaching approach, all which came from the PIE implementation and constant reflection and changing how we as a team interact with customers, we have been able to really understand what has caused someone to behave in a particular way and help them overcome that issue and learn different, more helpful behaviours for the future. Before we would have just responded to a rule being broken (e.g. aggressive behaviour) by issuing a warning or notice, and that never really changed anything. Sometimes it made the person dig their heels in more or be even more aggressive or challenging. We now are able to show that we really care and want to work with people to make their futures better. It really gives people hope that things can change and they are in control of their future.”

“A big learning point for me was that the PIE stuff makes you re-evaluate your own drivers. I always thought I'd been using appropriate and professional language, but now can see that I used to hide behind certain phrases if I was uncomfortable in a situation, or felt threatened. Reflective practice helped me to consider how I'd been feeling and why I'd used particular words/actions, and then examine on whether these had helped a situation or actually antagonised it. And I could really see, you know, that though I would have sworn I was doing the right thing, that actually I'd made things worse, but I had this kind of excuse that the customer had 'chosen' to behave in a way that got them into trouble.”

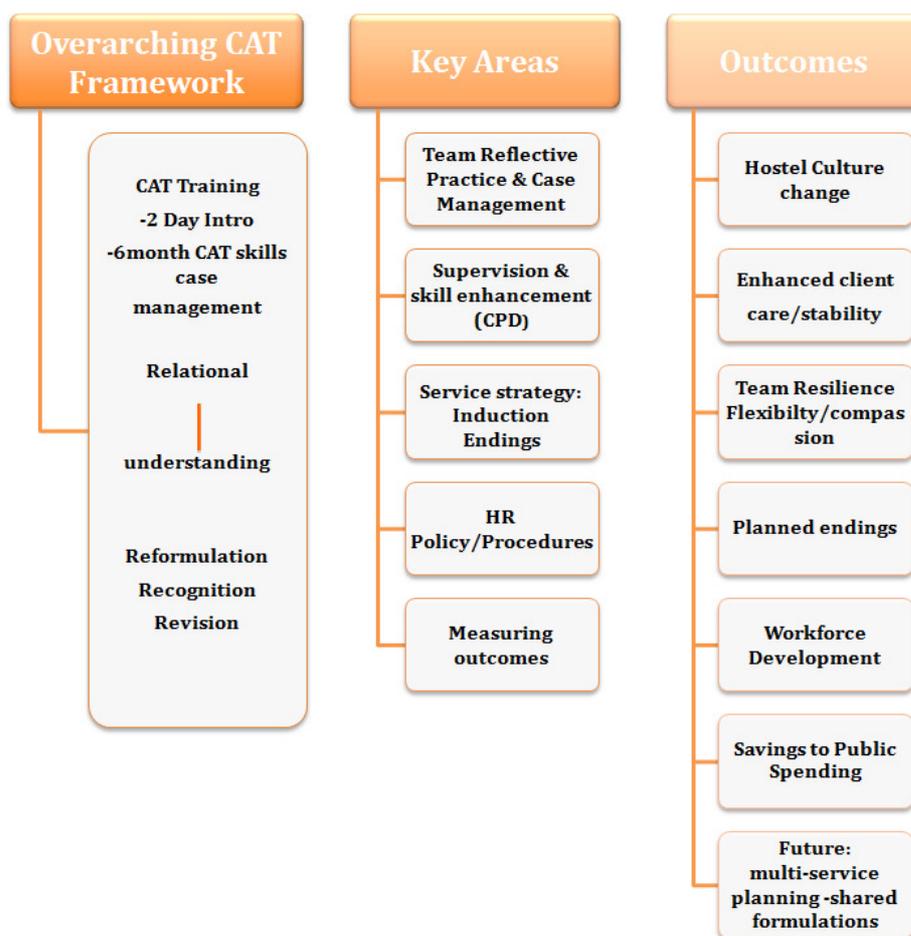
“We all have gone through a change, it was quite scary at first because you have to really examine, in front of the whole team, how you think you've – well – failed, basically. Your instinct is to excuse or explain, but we had to get used to really looking at whether we could have done anything different, to kind of coax out a different response from the customer. It's kind of like if we approach it (a situation) so differently, maybe it'll take them aback for a second, and realise that we *are* there to help after all, we're not the enemy. And once you've cracked that, it's easy, the relationship and trust just flows. But you have to be very open, very vulnerable at first. It's a process you have to trust in.”

www.riverside.org.uk/care-and-support/supported-living/

Case study: Liverpool YMCA

In 2014 managers of Liverpool YMCA (LYMCA) approached Dr Karen Shannon to provide training in Cognitive Analytic Therapy (CAT) case management. They wanted to enhance their way of working with residents and begin working in a psychologically informed way with clients with multiple complex needs (MCN).

Initially one operational leadership manager and seven support workers engaged in course requirements over six months. The course included: clinical supervision with Dr Shannon, one session of personal CAT therapy, and two pieces of course work. All staff successfully completed the course. Subsequently LYMCA introduced CAT as a hostel-wide framework. The impact of CAT as a framework on key areas of organisational and team functioning is described below:



All 75 staff who have non-therapy roles working with 141 clients at YMCA, from CEO/Directors to support workers to domestics to receptionists and horticultural workers, attended a two-day introductory training in use of Cognitive Analytic Concepts. Also in 2016 the Director of Operations, another two operational leadership managers and another five support workers completed another six-month CAT skills Case Management course to enhance each of their roles. In 2017 there are plans for the inclusion of the CEO, the entire senior leadership and operational leadership team to experience the intensive six-month programme.

This case study aims to inform practitioners wanting to implement similar strategies within homeless services and supported accommodation projects.

Reflective Practice & Case Management

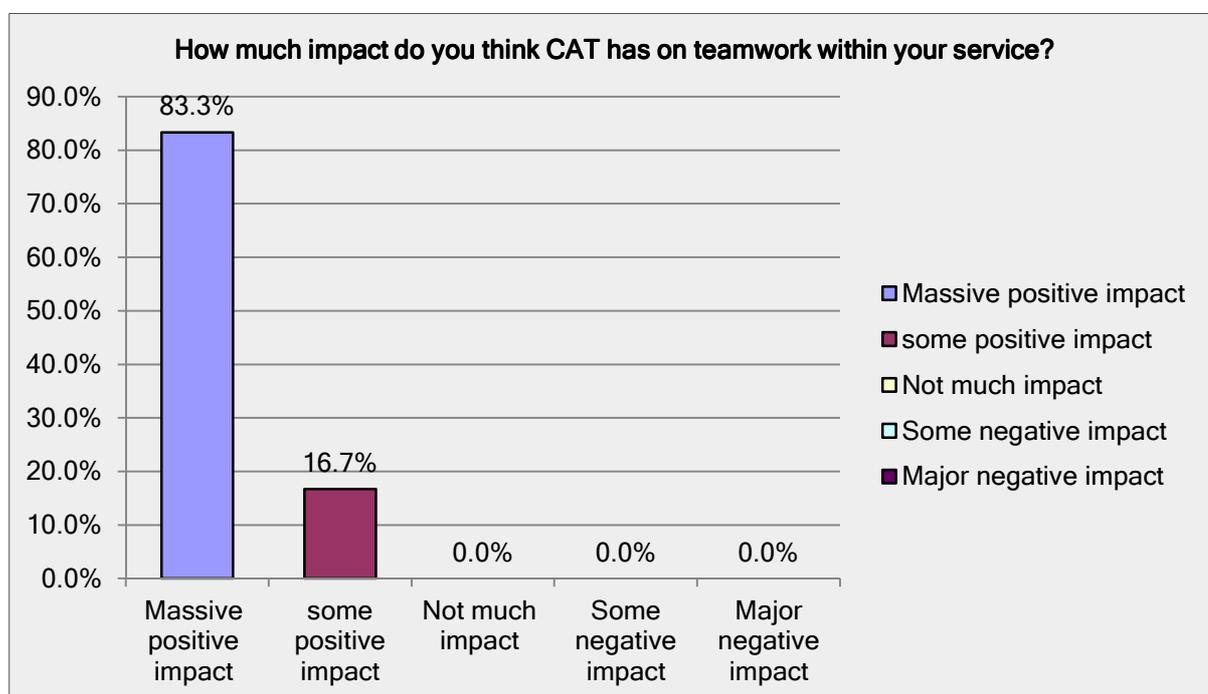
As reflective workers and staff teams, it is staff that need to use 'elastic tolerance' and be flexible. This method offers different ways of relating and responding to residents, despite powerful pulls to re-enact unhelpful patterns of behaviour and consequence such as evicting or ignoring.

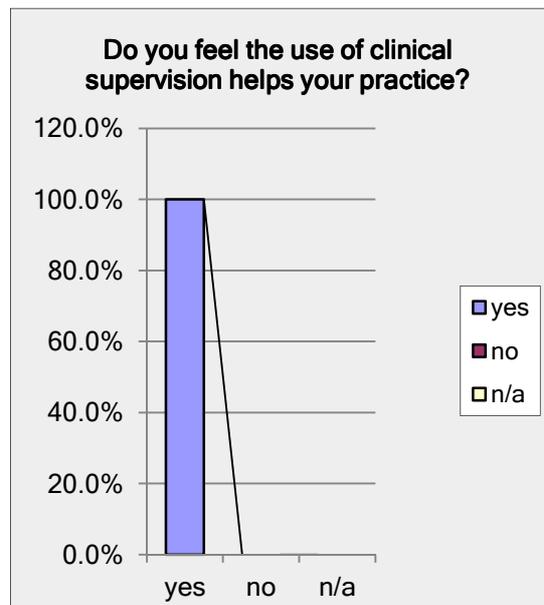
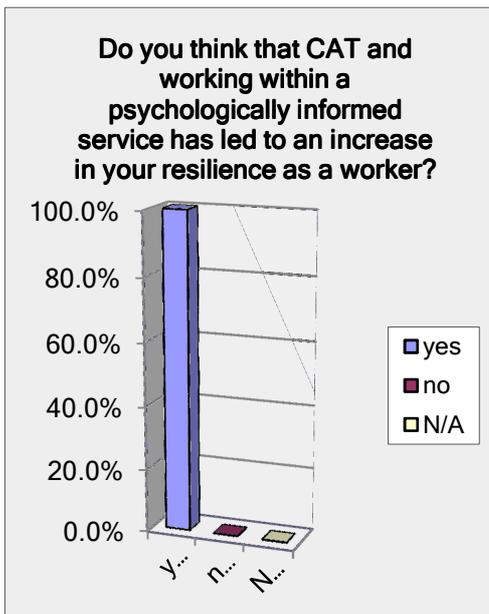
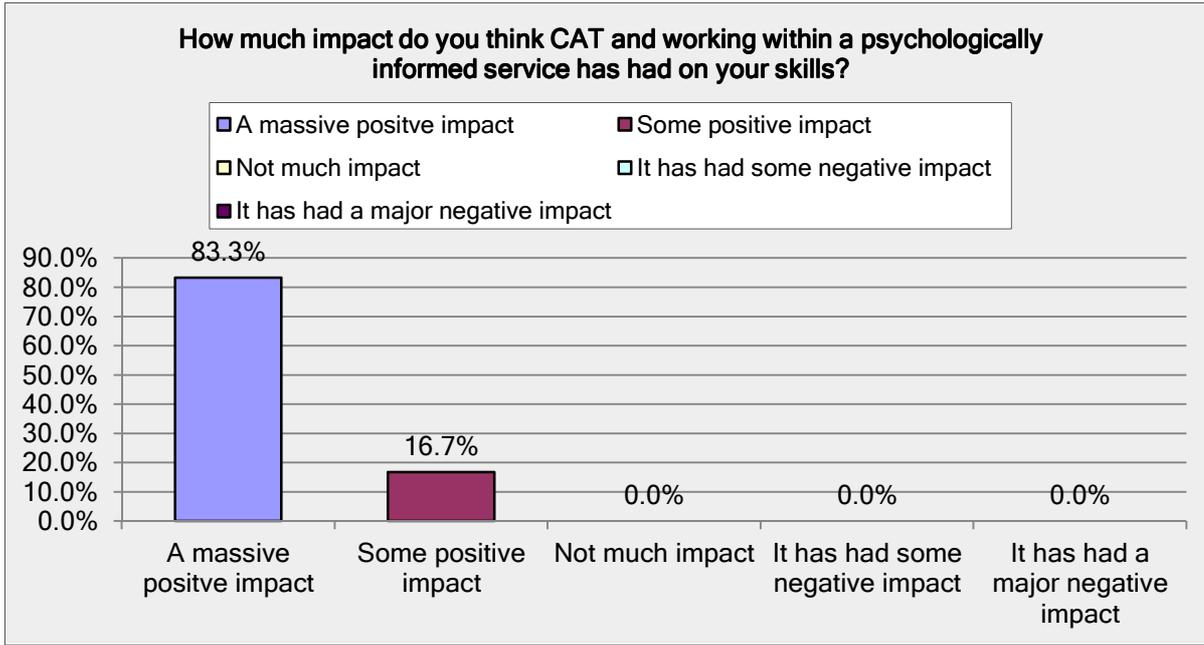
Following on from the first CAT trainings, LYMCA implemented weekly reflective practice sessions where two accredited CAT case managers facilitate reflective sessions with the staff team, around residents who are presenting as 'hard to help'. The team covers any anticipated problems the resident may have and plans for them with a whole team response, from reception staff to case managers. All take an active role in someone's care and support.

These sessions provide an open forum where staff can discuss their feelings of frustration and confusion that they may feel due to working with MCN clients. This helps in the mapping of accurate responses that staff may give toward the resident if they feel this way. In the past, it has not been common practice for support workers to openly share their feelings around their supporting relationships with residents. This honesty is promoted and encouraged during these meetings, offering staff the chance to off-load and manage feelings.

Staff resilience & team development

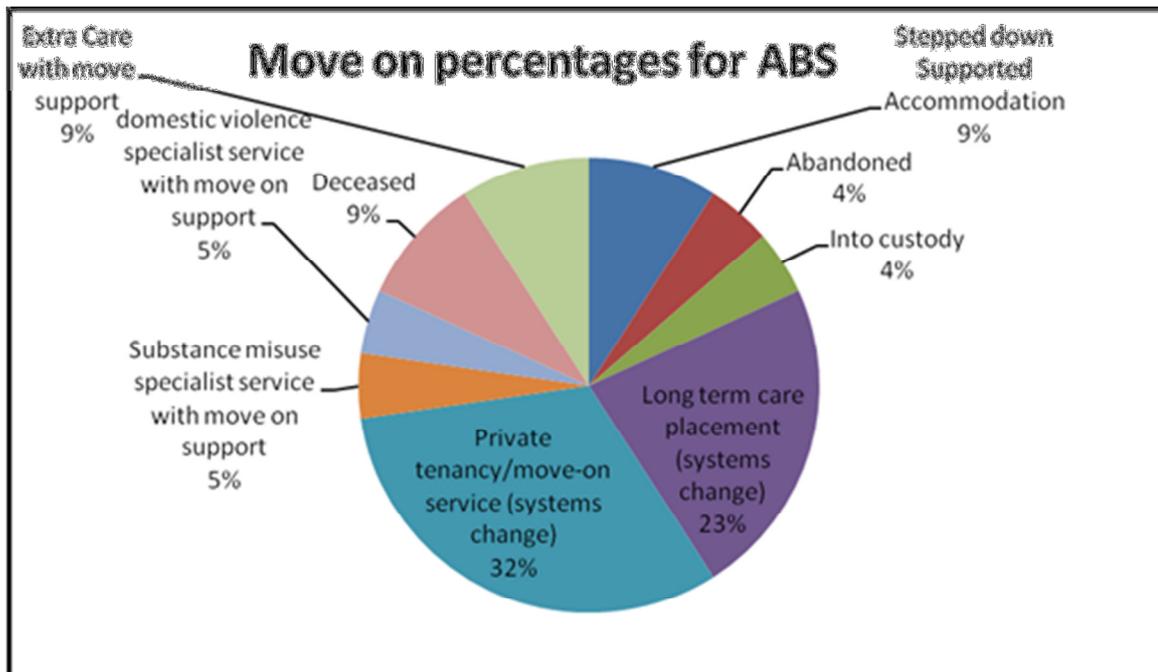
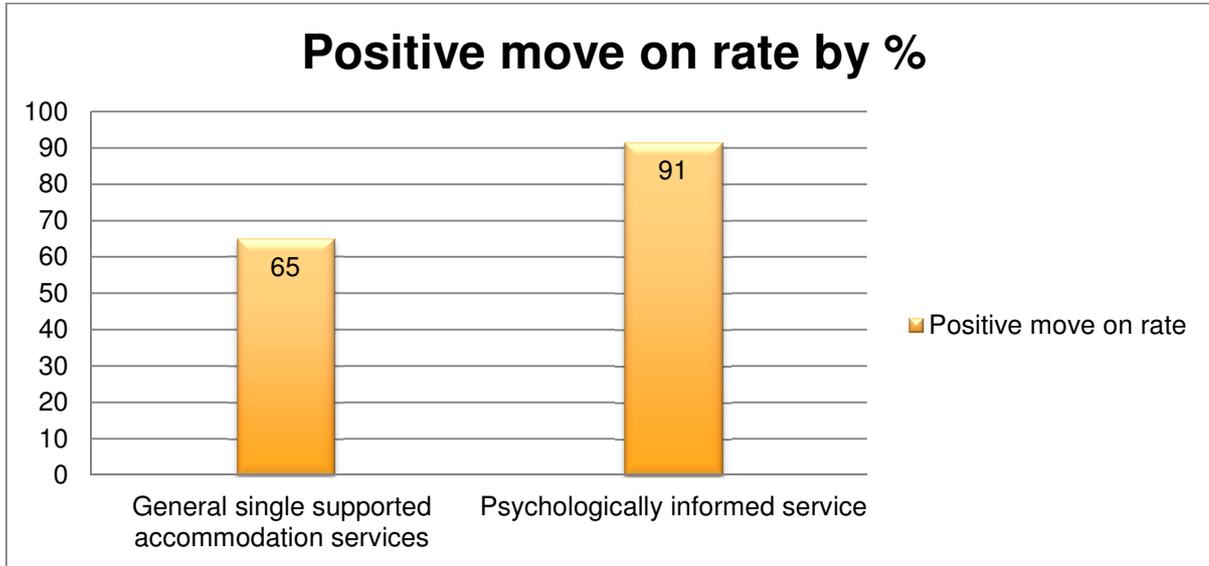
This psychological approach to working with residents has greatly improved outcomes not only for the residents themselves, but also for the staff who feel that their resilience and skills have improved. It has also had an impact on the performance of teams. A survey conducted with all staff that uses CAT produced the following results:





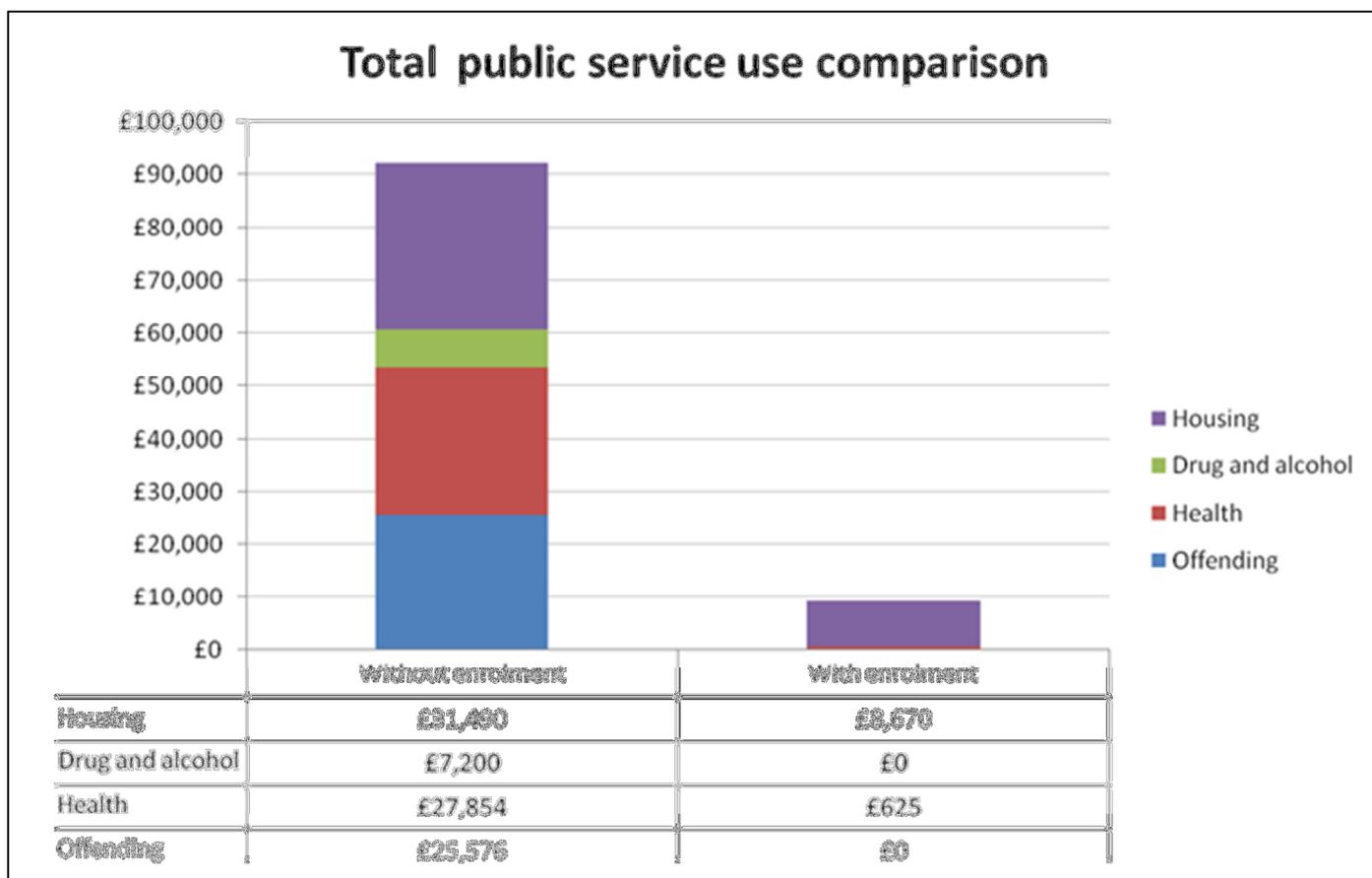
Outcomes for service users

Outcomes within the psychologically informed services can be recorded in a number of ways. One of the more traditional ways to record outcomes would be to use the 'positive move on' rate of the service (i.e. moved to accommodation which is preferential and more suitable to the needs of the resident). Within the city the average positive move on percentage rate for supported accommodation providers stands at 65% whereas within the psychologically informed service this percentage stands at 91%. A breakdown of these moves is show below.



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Another form of associated outcome could be the savings to public services by providing case studies from those in the service. These cases are regular attendees at A&E or custody. In one study, the total cost saving for public services has been £82,285 over a 24-month period. The individual's costs became focused on housing costs and planned health interventions, rather than more expensive emergency interventions and engagement. This will continue to be monitored for the duration of the programme.



A full journal article on the psychological case management work undertaken by Liverpool YMCA has been published via the Association for Cognitive Analytic Therapy (ACAT) and is available via the following link: You can follow Liverpool YMCAs CAT case management work via Twitter: https://twitter.com/CAT_LYMCA and also see the Liverpool YMCA website: www.liverpoolymca.org.uk

Resources

Reflective Practice

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www.homeless.org.uk/sites/default/files/site-attachments/Creating%20a%20Psychologically%20Informed%20Environment%20-%202015.pdf

An online community of practice for PIE including information about services and research:

<http://pielink.net/>

Homeless Link's guidance and webinars about TIC and PIE:

www.homeless.org.uk/our-work/resources/trauma-informed-care-and-psychologically-informed-environments



What we do

Homeless Link is the national membership charity for organisations working directly with people who become homeless in England. We work to make services better and campaign for policy change that will help end homelessness.

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