



Linden Lodge School

Supervision Framework

2021

Concept

Linden Lodge school understands the vital importance of a robust clinical supervision system to underpin a safe and effective service.

Supervision helps therapists reflect on their practice, identify areas for improvement, and put development plans or strategies in place.

- Effective supervision and the recording of supervision is required to meet professional standards defined by professional bodies and by the HCPC.
- Supervision is one way therapists can complete continuing professional development (CPD), an important part of meeting HCPC and discipline specific professional bodies standards of conduct, performance and ethics.

What is supervision?

- Supervision can take a variety of different forms. It can be undertaken on a 1:1 or group basis depending on the needs of the individual therapists and service.
- Different essential elements must be considered when undertaking supervision of therapy team members these include-

Types of Supervision

Clinical/professional supervision- clinical decision making, assessment and interventions, specific ethical decisions, personal response to work context or practice, clinical prioritisation and case load management, scope of practice, duty of care, user involvement, development of new service, team dynamics, values and interpersonal relationships. Develop skills in reflection to narrow the gap between theory & practice and to develop reflective practice.

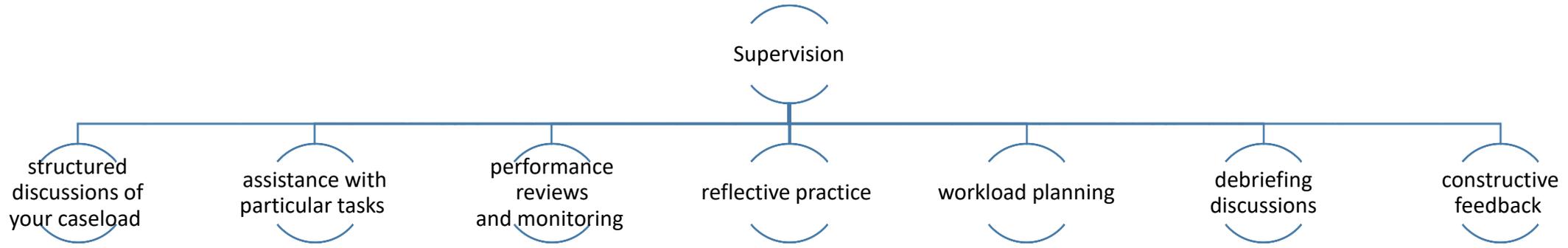
Wellbeing supervision- offering a space to 'off load', seek validation or advice to providing an opportunity to develop skills, knowledge and practice in a more general way

Managerial supervision- operational and strategic issues, such as mandatory requirements, organisational changes, service developments, record audits, PDPR and individual KPIs. To develop partnership between practitioners and clinician/team support staff. To provide a safe space for ideas or constructive feedback to be given.

Safeguarding supervision- focus on safeguarding issues and case studies to ensure compliance to safeguarding processes is swiftly and effectively adhered to and understood in practise.

These essential elements often overlap in discussions so supervisors must be equipped to provide support and guidance on all the above element or refer to another team member to provide the required/ more specialist supervisory support as necessary.

Activities can include



Proforma

- Linden Lodge utilise a structured supervision form to facilitate the forming of an outcomes based action plan which takes into account all aspects of supervision, highlighting key issues and next steps in staff and consequential service development

Supervisee	
Supervisor	
Date, time and duration of supervision	1 hour

Date of last supervision attended:

Safeguarding supervision attended last quarter:

A) The children/young people you look after - Review of children/key working/casework and current workload		
Summary of discussion:		
Agreed actions and timescales:		
B) Safeguarding – Any concerns on caseload, use prompts such as 'is there anything worrying you'		
Anything to escalate?	Escalate to whom?	Supervisor please indicate date and method of escalation below.
C) Your Development – Discussion of roles and activities, progression of PDR objective and review of previous supervision actions		
Summary of discussion:		
•		
Agreed actions and timescales:		
D) Your Learning and Progression - Achievements supervisee particularly proud of, discussion of training and development needs		
Summary of discussion:		
•		
Agreed actions and timescales:		
•		
E) Supporting You - Personal reflections, demands/frustrations/support/challenges you may be facing, Annual leave, TOIL, etc.		
Summary of discussion:		
Agreed actions and timescales:		
G to give support for the tribunal as necessary e.g. if called to the tribunal.		

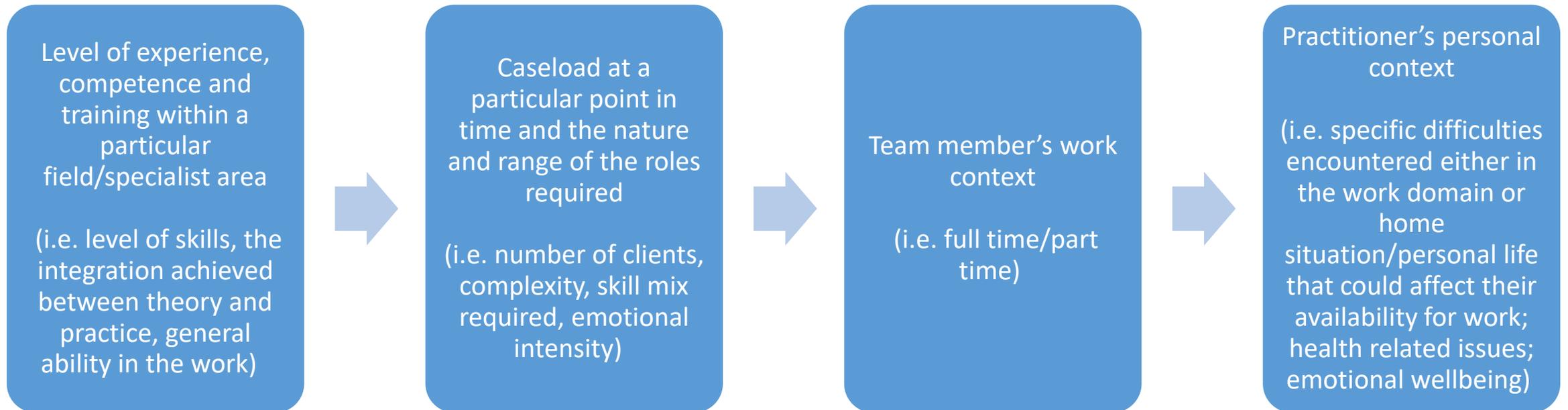
Date and time of next supervision	
Supervisor's signature	Date
Staff signature	Date

Structure, Frequency & Duration

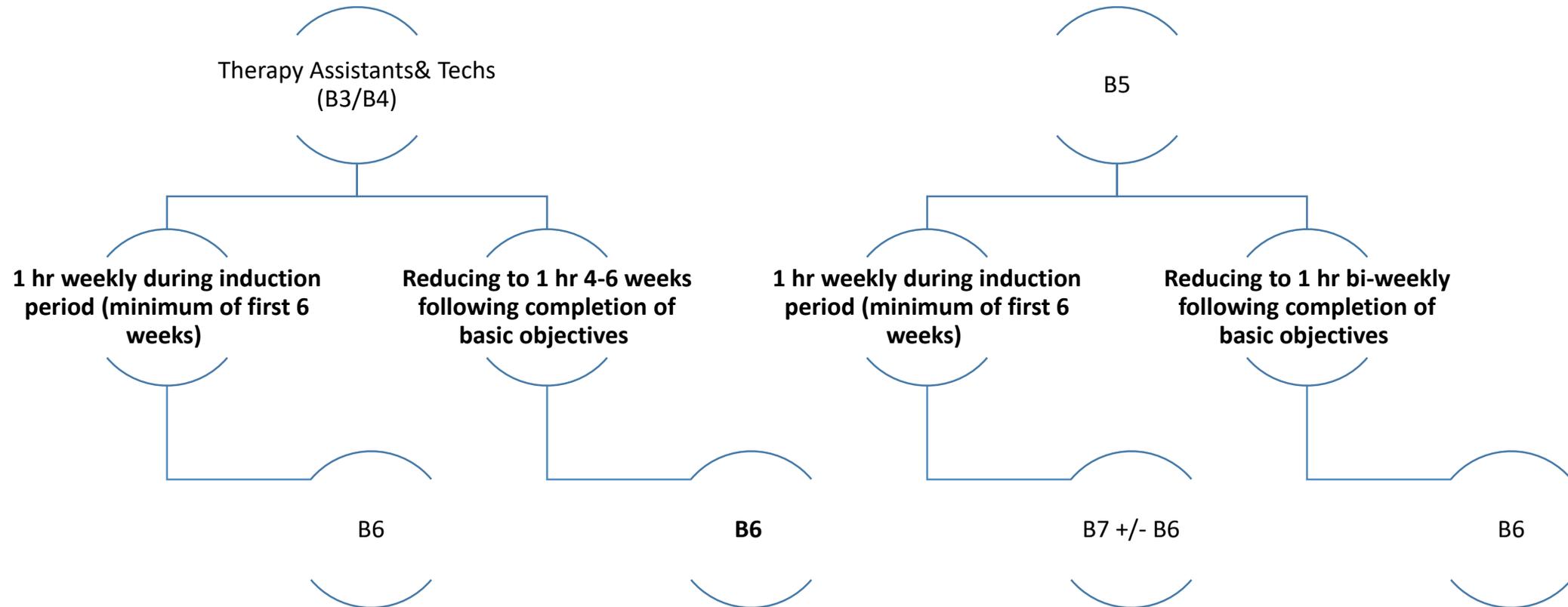
There is currently no nationally-prescribed frequency or duration for supervision. **However, CQC requires that supervision should take place regularly and that the frequency and duration should be adequate to ensure safe and competent care for people who use services.**

- Intensity of supervision can change
 - As a practitioner develops their expertise
 - Transitional periods
 - Extends the demands of their work and roles
- Quality of supervision is as important as quantity.

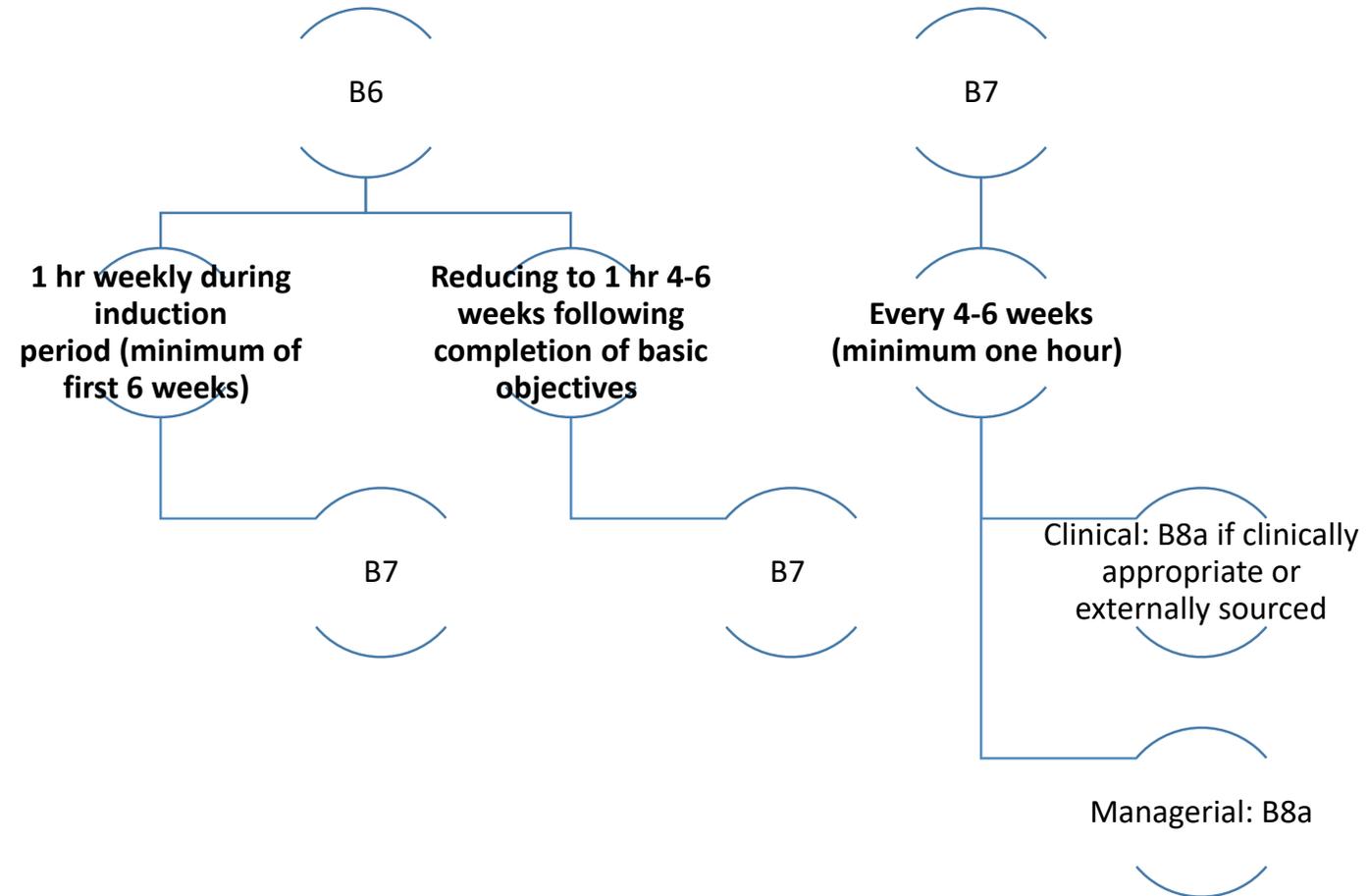
Frequency Reflection



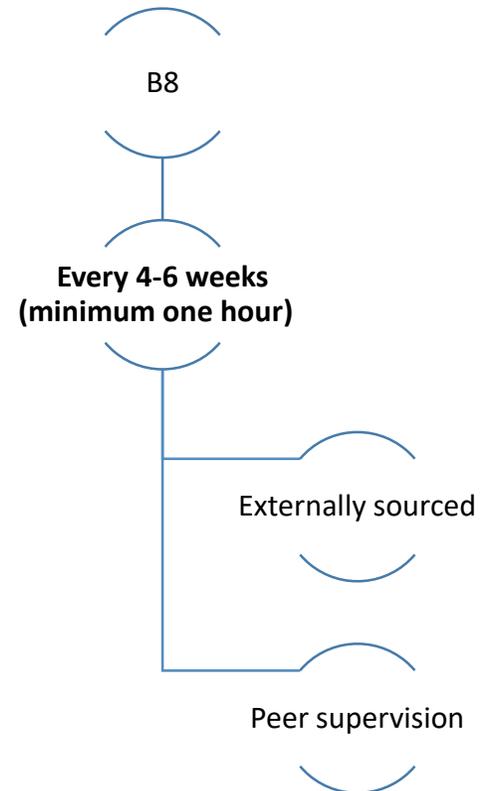
Model



Model



Model



- **NB: Locum staff** will be offered clinical supervision as part of their weekly timetable- this will be undertaken in a group format and lead by the discipline specific B7

Contract

SUPERVISION Contract

The aim of supervision will be to address supervisee's development, offer them support and enable them to comply with professional standards. A variety of methods will be used within sessions but the primary focus of work within patient caseload, personal development plan, and any other issues which may arise.

Both parties agree to the following:-

- The frequency of supervision shall be agreed between supervisee and supervisor- please refer to the Linden Lodge Therapy team's supervision guidance and processes- which will detail minimum standards for frequency and duration (available on Linden Therapy Teams-->files-->Supervision)
- It will occur in an environment (directly or via Teams) which enables both parties to concentrate and to reflect in depth. It may be appropriate for the session to take place in a variety of environments- including clinical/ classroom environments if the objective of the supervision is to provide support or opinion in completing a clinical/ practical task. How feedback will be given in these circumstances and the role of the supervisor and supervisee should be agreed to ensure a positive experience for the pupil/ other staff involved. For example- commencing the session completing a clinical task/ direct supervision of tasks and feedback given/ reflection undertaken after in a private environment.
- Both parties will be punctual and all efforts made to ensure privacy and no interruptions. This will only be rearranged in the event of an illness or crisis.
- Supervision notes are written by the supervisee in the session and agreed by both parties. Each session will be signed by both parties as an accurate record through typing names in at the end of the supervision and a PDF emailed at the end or as soon after supervision as possible. This record is to be kept safe and secure by both parties.
- In the event of any irresolvable dispute on this or any other issue within supervision either party have the right to approach **Senait Goitom** (*Head of Nursing*) and **Harri Ashworth** (*Therapy Lead*), **Debora Rix** (*School Head teacher*) or HR who have the right and authority to act as mediator. |

Frequency of supervision: a minimum every 4 –6 weeks (the frequency may be greater than this to support new starter/ those changing roles/ changing demands of the service etc and will be agreed between supervisee and supervisor)- please refer to the Linden Lodge Therapy Team supervision and guidance for more information.

Length of supervision: 1-1.5 hours

- Booking and preparing for supervision. This includes addressing previous actions, and preparing supervision/appraisal document with points for discussion. The supervisee will bring their CPD/Preceptor ship Folder/E-file to the appraisal once a year, and CPD will be discussed at each supervision meeting.
- Supervision notes are written by the supervisee in the session and agreed by both parties. Each session will be signed by both parties as an accurate record and true reflection of supervision through typing names in at the end of the supervision and a PDF emailed at the end or as soon after supervision as possible. This record is to be kept safe and secure by both parties.
- It is the responsibility of the supervisee to maintain copies of all supervision records confidentially. If the records are recalled, the supervisee may blank out any personal information they do not wish to be seen.
- Working with the supervisor to build an environment that facilitates open communication and mutual respect.

Supervisor will be responsible for: -

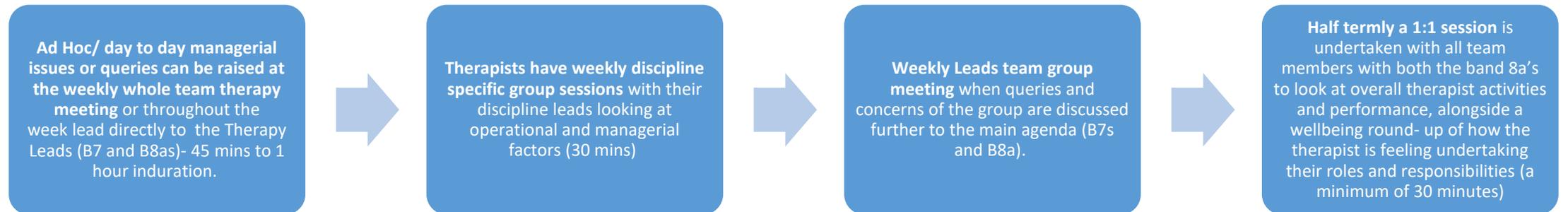
- Working with the supervisee to build an environment that facilitates open communication and mutual respect.
- It is responsibility of supervisor to store supervision records in a confidential folder (school drives) that meet data protection policies and procedures.
- Next supervision to booked at end of each supervision in agreement between supervisor and supervisee.

It is recognised that all disclosures within supervision should be treated with a high level of discretion. In exceptional circumstances supervisors will have to share disclosures with their own supervisor when they need advice or support. Contents of supervision, with prior agreement from both parties will be discussed as necessary with **Senior Clinical Team, and/or Head Teacher**. (Examples: disclosure relating to behaviour which breaches the professional code of conduct or organisational policy and issues relating to risk to self and/or others).

Supervisor signature:
Date:

Supervisee signature:
Date:

Managerial & wellbeing supervision- all staff



Safeguarding

- Safeguarding supervision is undertaken on a half termly basis in group sessions (60 min) lead by the DSL.

Confidentiality & Culture

- Copies of the supervision forms are shared between the supervisor and the supervisee and with the service leads as applicable
- Issues discussed in the team meeting or group forums are minuted and actions points created as necessary
- Those having supervision responsibility to document and share unless otherwise discussed

Developing Supervisors

Any team members new to supervision- due to progression of banding or due to working in a full team structure for the first time- are mentored through the process alongside more experienced supervisors in the team.

They will commence independent supervision of appropriate team members once they have been signed off as competent by an experienced supervisor.

- Supervisors will be offered an annual supervisor best practise update from a suitable identified provider.
- Should a supervisee raise a concern regarding their supervisor this will be investigated by the team leads and support provided to ensure that the supervisor receive necessary support and upskilling, and supervisees receive the support that they require.

Monitoring

The Therapy Provision is **monitored monthly by the CCG** which includes review of key performance indicators, risks, quality and control and Safeguarding incidents.

The supervision process and paperwork will be **audited annually (FEBRUARY)** by the Heads of Therapy to ensure that minimal standards are being exceeded and that support or updates are given in a timely manner.

Supervision will be a separate process to the PDR (appraisal) process- however it will be monitored alongside this process.

Staff attitudes on the supervision they receive will be monitored (in addition to the above processes) via the termly staff wellbeing surveys that will be created and monitored by the Therapy Leads.