
Report To: Health and Social Care Committee **Date:** 25th February 2016

Report By: Brian Moore
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Inverclyde Health and Social Care
Partnership (HSCP) **Report No:**
SW/19/2016/SMcA

Contact Officer: Sharon McAlees Head of
Children's services and Criminal
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Subject: SOCIAL WORK SERVICES SUPERVISION POLICY

1.0 PURPOSE

- 1.1 The purpose of this report is to advise the Health and Social Care Committee of the updated supervision policy for social work service staff in Inverclyde that meets the obligations of the Scottish Social Services Council (SSSC) and the HSCP.

2.0 SUMMARY

- 2.1 The policy sets out the standards for supervision for the social work services workforce in Inverclyde.
- 2.2 It builds upon the previous supervision policy and has been updated with contributions from a social work service staff questionnaire, a Social Work Supervision Group involving practitioners from across the HSCP, and the Practice and Care Governance Group.
- 2.3 It recognises the integrated nature of the delivery of social work services and the priority of the HSCP that a valued, confident and competent social work service workforce is essential, if services of a high standard are to be delivered to the people of Inverclyde.
- 2.4 The Supervision Policy will be launched on the 15th March 2015 at World Social Work Day. This is significant as the values and principles of our policy are akin to what this day represents, namely communities thrive when the dignity and rights of all peoples are respected. This is the vision of Getting It Right for Every Child, Citizen and Community.

3.0 RECOMMENDATIONS

- 3.1 That the Health and Social Care Committee note the significance of the duties and responsibilities outlined in the HSCP Supervision Policy.

Brian Moore
Corporate Director (Chief Officer)
Inverclyde HSCP

4.0 BACKGROUND

- 4.1 Inverclyde HSCP's vision is to promote an excellent service delivered by a skilled and valued workforce who work with others to empower, support and protect people, with a focus on prevention, early intervention and enablement.
- 4.2 It is a generic supervision policy that has been developed with a view to achieving high level outcomes through an outcome focused framework. It sets a minimum standard of professional development that promotes consistency across the HSCP, giving opportunity for each service to individualise their strategic goals and plans.
- 4.3 It ensures that all social work staff within the HSCP have equitable access to good quality, effective supervision, while taking account of the different working environments. The policy promotes two models: 1 to 1 model of supervision, and group supervision, with complementary processes. This reflects the level of complexity of work undertaken, the context in which the supervisor and supervisee work together and the stages of staff members' professional development.
- 4.4 It supports a set of standards within supervision practice. As well as giving a clear message to staff about what to expect within supervision, these standards are key to supporting and developing the skills, knowledge and values of all social work staff within the HSCP staff and inform the performance management process that also seeks to achieve better outcomes for people who use the service. It is the line manager's responsibility to ensure these standards are upheld and involve the following areas:
- Each member of staff will have a supervision agreement
 - This will be reviewed annually, along with the appraisal
 - Each supervision session will be formally recorded
 - Each member of staff will have a Personal Development Plan, which will be reviewed annually through the appraisal process
- 4.5 It accords with the Social Services Council (SSSC) Code of Practice for Employers of Social Service Workers which outlines the expectations to have written policies and procedures in place to include the following standards:
- Effectively managing and supervising of staff to support effective practice and good conduct and supporting staff to address deficiencies in their performance
 - Having systems in place to enable social service workers to report inadequate resources or operational difficulties which might impede the delivery of safe care .
 - Managing the performance of staff and the organisation to ensure high quality services and care.

5.0 IMPLICATIONS

FINANCE

5.1 Financial Implications:

Training costs to support implementation are being negotiated , however any costs will be contained within existing budgets.

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments

LEGAL

5.2 There are no legal issues within this report.

HUMAN RESOURCES

5.3 There are no human resources issues within this report.

EQUALITIES

5.4 There are no equality issues within this report.

Has an Equality Impact Assessment been carried out?

	YES (see attached appendix)
	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

REPOPULATION

5.5 There are no repopulation issues within this report.

7.0 CONSULTATION

7.1 This report has been prepared by the Chief Officer, Inverclyde Health and Social Care Partnership (HSCP) after due consultation with Staff Practitioners Forum.

8.0 BACKGROUND PAPERS

8.1 None.

Inverclyde HSCP Supervision Policy

DRAFT

Forward

Our vision is to promote an excellent service delivered by a skilled and valued workforce who work with others to empower, support and protect people, with a focus on prevention, early intervention and enablement.

This is a generic supervision policy for social service staff in the HSCP. It has been developed with a view to achieving high level outcomes through an outcome focussed framework. It sets a minimum standard of professional development that promotes consistency across the HSCP, giving opportunity for each service to individualise their strategic goals and plans.

1. Introduction

- 1.1** This policy sets out the standards for supervision for the social work services workforce in Inverclyde. It builds upon the previous supervision policy and has been updated with contributions from a social work service staff questionnaire, a Social Work Supervision Group involving practitioners from across the HSCP, and the Practice and Care Governance Group. This recognises the integrated nature of the delivery of social work services in Inverclyde and the priority of Inverclyde HSCP that a valued, confident and competent social work service workforce is essential, if services of a high standard are to be delivered to the people of Inverclyde.
- 1.2** Changing Lives: Practice Governance Framework (Scottish Government, 2011) states that *reflective practice, coupled with an environment which promotes wellbeing, a healthy work-life balance and appropriate accountability, supports improving practice and on-going professional development* to deliver improved outcomes for service users through evidence informed and value based practice.
- 1.3** The Scottish Social Services Council places a clear responsibility on agencies and on individual practitioners to promote practice within a competency framework. This requires that each individual worker must demonstrate not only evidence informed practice but also continuous professional development. It also places a responsibility on employers to provide supervision for staff.

2. Purpose of Supervision

- 2.1** Inverclyde HSCP prioritises supervision at all levels in the organisation, in order that it develops a learning culture that achieves good outcomes for service users, carers and staff. It reflects the core commitment to reflective practices, and accountable decision making.
- 2.2** Inverclyde HSCP recognises the parallel process of staff supervision and work with service users and carers. Supervision is based on the principles of outcome focussed practice, which identifies the role of the staff member, who then works with individuals to develop strengths and solutions towards addressing wellbeing needs.
- 2.3** Outcome focussed supervision confirms the role of a supervisor, who is given responsibility by the HSCP to work with a supervisee. Its purpose is to identify strengths and skills to be outcome focussed in their work. This is based on organisational, professional and personal objectives that are in line with the values,

ethics and principles underpinned by all the regulatory bodies that support social work service staff, within the HSCP.

2.4 Supervision within Inverclyde HSCP is based on the following principles:

- Supervision should be centred on achieving better outcomes for service users and carers
- Supervision should promote and evidence accountable practice by supporting staff to reflect on, analyse and evaluate their practice
- Supervision should establish clear practice roles and responsibilities to manage the emotional impact of their work
- Supervision should build capacity for development and improvement (1)

3. Models of Supervision

3.1 To ensure that all staff within the HSCP have equitable access to good quality, effective supervision, this policy takes account of the different working environments. This policy promotes two models: 1 to 1 model of supervision, and group supervision, with complimentary processes. This reflects the level of complexity of work undertaken, the context in which the supervisor and supervisee work together and the stages of staff members' professional development.

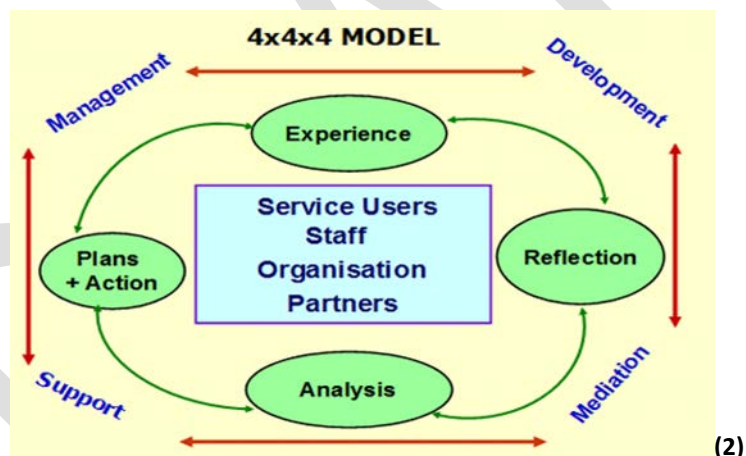
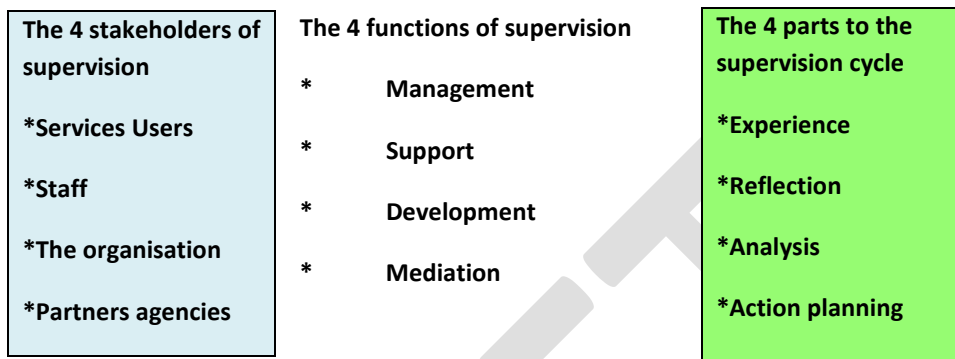
3.2 All staff within the HSCP will receive a minimum frequency of supervision (see appendix 1).

3.3 Both models of supervision are based on the four key principles, and in many cases staff may benefit from participating in more than one model.

3.4 The models of supervision are based on those developed by Tony Morrison and provide a framework which supports both models of supervision in this policy. His integrated 4x4x4 model of supervision is well established within Inverclyde HSCP social work staff and is explained below.

(1) Reference has been made to Stirling Council Supervision and Practice Development Planning Policy Guidance

This focuses on the interrelationship between:



3.5 This framework sees supervision as a process that integrates the managerial function of supervision, with a focus on analytical and value based reflective learning to improve outcomes for service users, while being grounded by professional and organisational accountabilities.

(2) Morrison, T (2005) Staff Supervision in Social Care. Brighton: Pavillion.

3.6 At the heart of this framework, is the recognition of a professional relationship within supervision, has a power dynamic which relates to the supervisor/supervisee relationship and the relationship between the service and the service user. The foundation for supervision rests on the worker being clear about their purpose and role, with the supervisor assessing, planning and developing the practitioner's skills, knowledge and building their confidence both at an intellectual, emotional and practice level. This take place through reflective learning that has a strong value, with:

- Role clarity
- Role security
- Empathy
- Assessment
- Partnership
- Planning
- Coaching/Intervention (3)

3.7 One to One Supervision (4) is a formal, pre-arranged and contracted process between supervisee and supervisor where the principles of supervision are achieved within an individual relationship, confidential setting and protected space. This aligns well with practitioners working in a case work model. The supervisor will be the supervisee's line manager.

The benefits of this supervision are:

- Protected time and focus for the individual practitioner
- A safe place for thinking and working through complex practice with a focus on direct work with service users and carers
- An opportunity for the line-manager to give attention to the quality of work, including issues of confidentiality and formal decision making
- An opportunity for the practitioner to initiate and direct their own learning process
- The development of a one to one relationship which allows modelling of relationships with service users

(3) Morrison, T (2005) Staff Supervision in Social Care. Brighton: Pavillion.

(4)SSSC Step Into Leadership www.stepintoleadership.info/assets/pdf/one-to-one_supervision.pdf

3.8 Group Supervision is a formal, pre-arranged process that is agreed by all participants. It involves the use of a group setting to enable members to reflect on their work and, by pooling their skills, experience and knowledge, to improve both individual and group capacity. The supervisor acts as a resource for the group either as a facilitator or a *useful informant* with others taking responsibility for facilitation. It aligns, but not exclusively to a group care setting.

The benefits of this supervision are:

- It is an open, supportive environment for collaborative or experiential learning
- A safe place for sharing, reflecting and building examples of good practice
- It provides broad opportunities and policy/practice developments to discuss service standards
- It reflects the model of group and collaborative practice with partner agencies

3.9 All staff in the HSCP will receive a minimum frequency of supervision delivered in one of the two ways above.

4 Procedures to Achieve Practice Standards (5)

To support the achievement of the key principles of supervision, Inverclyde HSCP has agreed a set of standards within supervision practice. As well as giving a clear message to staff about what to expect within supervision, these standards are key to supporting and developing the skills, knowledge and values of all HSCP staff and inform the performance management process that also seeks to achieve better outcomes for people who use the service. It is the line manager's responsibility to ensure these standards are upheld and involve the following areas:

- Each member of staff will have a supervision agreement
- This will be reviewed annually, along with the appraisal
- Each supervision session will be formally recorded
- Each member of staff will have a Personal Development Plan, which will be reviewed annually through the appraisal process

(5) This procedure is informed by Stirling Council Supervision and Practice Development Planning Policy Guidance, SSSC Step Into Leadership www.stepintoleadersip.info/assets/pdf/one-to-one_supervision.pdf, Reference - NHS Greater Glasgow and Clyde Partnership Nurse Clinical Supervision Policy and Framework, NMC Standards for Competence (2010) and Action12 of Rights, Relationships and Recovery Refreshed Action Plan 2010

The Supervision Agreement

The purpose is for the supervisee and supervisor to discuss, agree and record what they want to achieve from the supervision process.

The principles are:

- Achieving better outcomes for service users

You should discuss and agree how the agenda and focus of supervision sessions will be centred on service users and carers. For instance, how your discussion of practice will identify progress in effecting change and address barriers to achieving planned outcomes. You should also agree how the use of observation of practice and feedback from service users and carers can verify the quality of service delivered, progressed and identify future focus.

This opens up a discussion with service users and carers to identify wellbeing concerns and ways to improve outcomes. This involves 3 areas:

- Process change – the outcomes that individuals experience through obtaining and using services and supports
- Change outcomes – this relates to time limit improvements that have been discussed between service users, carers and services
- Quality of outcomes – the activities that are working to support and achieve wellbeing outcomes (6)

- Promoting and evidencing accountable practice

You should discuss and agree how you will together use supervision to monitor and promote the supervisee's responsibility for their practice and decisions. How the supervisor will promote autonomy, whilst ensuring practice is evidence informed and adheres to service standards. How the supervisee will be enabled to give feedback on their experience of supervision. You should also agree how decisions relating to services users, and the supervisor's role in this, are recorded in case records. This is a joint responsibility to ensure that the views of service users are explicitly referenced in supervision on a frequent basis and is then reflected upon through practice.

(6) Barrie, K and Miller, E (2015) Meaningful and Measurable: Developing Approaches to the Analysis and Use of Personal; Outcomes Data

- Establishing clear practice roles and responsibilities

You should discuss and agree how you will together use supervision to support the supervisee's understanding of their role and responsibilities within the team and organisation. How you will use the job description, team plan and service plan to inform supervision and how you will support collaborative and multi-disciplinary working. Induction and practice development planning should support this. A toolkit is being developed to assist this process.

- Building capacity for development and improvement

You should discuss and agree how you will together use supervision to promote individual and organisational learning. You should agree how supervision will support the supervisee to analyse their practice and identify examples of good practice, to share with others and contribute to wider learning. You should describe how the supervision process will inform and be informed by the supervisee's practice development plan and the service plan. You may also link this section to the first principle, agreeing how constructive feedback will be provided and used e.g. within observation of practice; practice audit and feedback from service users and carers.

Supervision Process

- Complimentary to Supervision (7)

The two core models of supervision have been outlined and are the minimum standard of its delivery. There are instances where complimentary processes may sit alongside these two models. They enable the supervisee to fully engage in a range of learning opportunities to promote their professional development. Those promoted by the HSCP are as follows, and include practice examples:

(7) SSSC Step Into Leadership www.stepintoleadersip.info/assets.pdf/one-to-one_supervision.pdf

Mentoring is a developmental process for newly qualified staff. It is based on a relatively informal relationship between a more and less qualified worker. Its benefits are:

- It is an opportunity for a newly appointed or qualified staff member to observe and learn from the practice of a more experienced colleague
- It provides support to newly appointed or qualified staff in navigating organisational systems or processes
- It provides reflective space for learning and challenges in practice

This may involve a newly qualified member of staff shadowing home visits or being a second worker in pieces of work e.g. attending meetings, assessments or care plans

Coaching is a developmental process that can be used either to support an experienced worker to develop skills and take on additional roles within the service or to enable learning and development to occur and thus performance to improve. The benefits are:

- Activities are developed and designed to suit the staff members needs
- It fine tunes and develops skills
- Provides the staff member with networks to assist their development

- This may involve support to lead in an area of service review, or the development of a local practitioner forum.
- Where there is performance management matter, assistance can be given to implement an improvement plan that has been agreed with a line manager

Shared Supervision allows multi-agency teams to share supervision between line management responsibility and clinical supervision, which is a process in which practice is supported and challenged through discussion and reflection with a supervisor promoting the safe and effective delivery of care. It tends not to be the supervisees line manager but instead a clinical supervisor is a practitioner with skills, knowledge and experience to

facilitate structured reflection on practice (8). Line management responsibility deals with operational and performance matters, where an individual staff member's workload, clinical practice and operational performance is monitored.

The benefits are:

- Emotional support and nurturing
- Professional development
- Reflection time leading to positive impact on patient care
- Trusted clinical supervision relations
- Constructive critique from peer or 'expert' (8)

Triadic or Tri-partite reflection (9) can be part of this model, which is expanded to include a 'consultant', whose job it is to assist the supervisor to help the supervisee. This has strengths in circumstances, e.g. for difficult supervision issues, or where the consultant role is used for training. It aligns to an integrated team setting, such as the Community Mental Health Team. The benefits are:

- Mutual learning from engaging in reflective practice that is supportive and challenging
- Promotes the receiving and giving of feedback on complex practice issues
- Promotes practitioner growth, professional development and outcomes for service users

This may be used in complex cases where a 'consultant' facilitates discussion to support reflection and outcomes for service users.

(8)Reference - NHS Greater Glasgow and Clyde Partnership Nurse Clinical Supervision Policy and Framework, NMC Standards for Competence (2010) and Action 12 of Rights, Relationships and Recovery Refreshed Action Plan 2010-11

(9) Bishop, V. (1998) Clinical Supervision in Practice, Nursing Times Research, London, MacMillan Press

This form of reflection may also involve accessing an existing resource within the HSCP, for example consultation with the systemic family therapy group ⁽¹⁰⁾.

Thematic discussion can apply in areas of learning across systems for example in areas of public protection or professional groupings within social services

This may apply in complex cases such as Adult Protection and where there are concerns raised by health matters

- Frequency of Supervision

In agreeing the frequency of supervision you and your supervisor need to ensure that the practice standards are met as detailed in appendix 1. All practitioners are expected and required to be committed to regular supervision in order to reflect critically on their practice and continue to identify areas of strength and areas for development

- Cancellation of Supervision

Supervision is a key part of professional development and should only be cancelled in exceptional circumstances, and be rearranged as soon as possible. Repeated instances of cancellation requires to be addressed and if required formally dealt with through the appraisal process.

- Preparation for Supervision

In agreeing how both parties will prepare for supervision you need to confirm the practical preparations such as preparing an agenda for discussion, identifying what has gone well as well as areas for development. If group supervision is one of the models used, supervisees should also identify how they will participate in the group process in terms of presenting an issue or supporting others in their reflective practice.

(10) A multi-agency group that can be contacted through CAMHS, Barnardos and Children's Services

- Recording Supervision

Most social work and social care staff should take responsibility for recording their own record of supervision. In this way each staff member will have responsibility for recording one supervision record. However, it can be agreed with certain services that supervisors will take on this task. The supervision record is an agency document. Both the supervisee and the supervisor should acknowledge the rights of senior managers, inspectors and performance staff to have access to the record and should consider how quickly the record will be produced and where it will be stored. You should also agree how sensitive information will be managed within the record. Whoever records the supervision, the other party should be able to add to the note of the meeting, if they wish to.

- Confidentiality of the Supervision Discussion

In agreeing the parameters of confidentiality within supervision and the elements of discussion that should be shared with appropriate others, it should be acknowledged that it is the supervisor's responsibility for identifying and dealing with issues of safe practice and their duty of care to the supervisee.

- Dealing with disagreements within Supervision

There may be occasions where you disagree on issues raised in supervision, be that in relation to achieving outcomes for service users; decision-making; role and responsibilities, practice competence or learning and development needs. Supervision has within it a power relationship as delegated by the HSCP. This should be acknowledged between the supervisor and supervisees, with the line management structure being explicitly detailed in the supervision agreement. Disagreements, where possible should be discussed maturely between both parties and, only referred through the line management structure where this cannot be resolved.

- Additional Arrangements

Many of us are working in integrated teams. Team managers have responsibility for the supervision of operational and performance management matters. While a clinical supervisor will support and challenge practice through discussion and reflection to promote the safe and effective delivery of care. The roles and responsibilities of each supervisor should be clearly detailed, reflecting the complimentary processes.

- Informal Supervision

Given the different setting in which staff support service users, supervision may be supplemented through informal discussions and team meetings. This is not to substitute one to one supervision, which is planned and has protected time.

The Practice Standard proformas are detailed in Appendix 2. Once you have completed and signed the Supervision Agreement, the original should be held by the supervisor within the supervisee's file with a copy going to the supervisee.

Supervision Record

The purpose of the supervision record is to maximize the impact of the supervision session by supporting the completion of agreed actions within agreed timescales. By agreeing the supervision record, supervisor and supervisee are evidencing shared decision making and emphasising the future focus of supervision discussion.

Disagreements should be recorded and actions and timelines agreed as to how these may be resolved.

Supervision records should note and evidence:

- The focus of the session
- Key information shared, e.g. changes to practice approaches; legislation
- Reflection on practice, feedback on good practice and embedding the learning from this discussion
- Discussion and planning to address any performance issues or learning and developmental needs
- Any staff/welfare issues

Each supervision session will be formally recorded by the supervisee, signed and held as supervision record by line manager, with the supervisee also having a copy.

Service user case notes/care plans or practice guidance as a result of discussions will be recorded on SWIFT

Personal Development Plan

Continuing learning and development of knowledge and skills is a right for all staff within Inverclyde HSCP and is essential to improving practice and outcomes for individuals, families and communities. The purpose of personal development planning is to demonstrate a shared understanding between the supervisor and supervisee of:

- The necessary skills, understanding and approach required within the supervisee's post
- The supervisee's level of skill, capability and understanding related to the post
- The supervisee's learning outcomes in relation to any identified developmental need
- The learning opportunities that will enable these outcomes to be met

Further details of the core competencies are contained through ICON-Human Resources-Performance Appraisal.

The supervisee is to complete a self-assessment in respect of the core competencies and this is then to be discussed with their line manager, with an agreed **Personal Development Plan**.

Each member of staff will have a practice development plan that will be formally reviewed annually and will inform on-going supervision