



CHILDREN

ADULTS

**Keeping Bristol Safe Partnership  
Integrated Supervision Good Practice  
Guide and Tools**

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## Introduction

Good quality supervision of staff is fundamental to safe and effective practice when working with children, young people, families and Adults at Risk. It is essential to professional development and supports practitioners to make sound and effective judgements in relation to outcomes for children, families and adults with care and support needs. This in turn enhances decision making.

Supervision provides a supportive learning environment, an opportunity to reflect on practice, assess risks and make decisions. It will support members of staff to be confident in providing services for children and young people, develop integrated working, improve their own performance and learn from practice.

*“an accountable process which supports assures and develops the knowledge, skills and values of an individual, group or team. The purpose is to improve the quality of their work to achieve agreed outcomes.”<sup>1</sup>*

Supervision is a key factor in Safeguarding and therefore supports staff to contribute to the overall aims and priorities of the Keeping Bristol Safe Partnership.

The aim of this guidance is to promote and develop a culture that values and engages in regular safeguarding supervision. It is intended to provide an overarching framework for all staff working in multi-agency organisations across Bristol whilst acknowledging that many of them have already existing and effective supervision processes in place. ***It is not intended to replace those but to reinforce them and to extend sound principles and good practice in all children’s and adult’s services.***

## Purpose of Policy

Many Serious Case Reviews into child and adult deaths and inquiries into serious incidents have highlighted an absence of effective supervision as a feature of the learning required<sup>2 3 4</sup> Following the death of Victoria Climbié,<sup>5</sup> Laming referred to supervision as the ‘cornerstone of good practice’ and Munro<sup>6</sup> in her review of child protection services described how ‘effective supervision can improve outcomes for children, young people and their families.’

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<sup>1</sup> Providing Effective Supervision 2007, Skills for Care and Children’s Workforce Development Council page 5

<sup>2</sup> Haringey Local Safeguarding Children Board: Serious Case Review “Child A” November 2008

<sup>3</sup> Surrey County Council: Safeguarding Adults Board 2014 The death of Mrs A Serious Case Review

<sup>4</sup> <https://www.bristol.gov.uk/documents/20182/1570919/FINAL+ZBM+April+17+for+publication.pdf/4c0a94c3-3c9c-86d6-5eb1-a47df8987e5b>

<sup>5</sup> Report into the death of Victoria Climbié: Laming (2003)

<sup>6</sup> The Munro Review of Child Protection: Final report; A Child centred System (2011)

Children's services are required to fulfil their legal duty under section 11 of the Children Act 2004 and their statutory responsibilities are set out in Working Together (2015).<sup>7</sup> This outlines that safeguarding supervision should be an integral part of practice for all practitioners but particularly for named and designated professionals within their role of supporting other professionals in their agencies to recognise the risk to children.

For Adult services it is the Care Act 2014 that requires individual agencies to promote individual wellbeing, which means a multi-agency approach is required to achieve positive outcomes for people who use services (Romeo, 2015).<sup>8</sup> ADASS also developed a [National Framework of Standards](#) for good practice and outcomes in adult protection work.

For Children's services within Bristol the KBSP (formerly BSCB) conducted a cross boundary Section 11 Audit in 2016 in partnership with our neighbouring Local Authorities. One of the areas addressed was training and supervision. The following was assessed:

- The presence of a policy statement for the provision of professional supervision / management oversight to all staff in the safeguarding and child protection arena
- Evidence that all staff are receiving such supervision/management oversight
- Evidence to show how decisions are made in supervision/management oversight recorded in case records
- Details required on the provision of support and training to supervisors

Areas that were highlighted as 'Good,' 'Requiring Improvement' or 'Inadequate' had actions allocated where that organisation had to provide written evidence to assure the KBSB that an improvement plan was in place. This compliance is monitored with a report to the Board after each audit. This audit is planned for every three years together with a series of yearly mini audits. A similar audit relevant to adult safeguarding was also developed.

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<sup>7</sup>[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/419595/Working\\_Together\\_to\\_Safeguard\\_Children.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/419595/Working_Together_to_Safeguard_Children.pdf)

<sup>8</sup> Romeo (2015) 'Social Work and Safeguarding Adults.' Journal of Adult Protection 17 (3), 205-207

## Principles and functions of Supervision

Central to all principles and functions of supervision is our responsibility to safeguard and promote the welfare of the children and adults at risk.

**Safeguarding and Promoting the Welfare of Children** is defined in Working Together to Safeguard Children (2015) as:

- Protecting children from maltreatment
- Preventing impairment of children's health and development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care; and
- Taking action to enable all children to have the best life chances

**Adult Safeguarding:** The Principles of Adult Safeguarding

- **Empowerment** – Presumption of person led decisions and informed consent.
- **Protection** – Support and representation for those in greatest need.
- **Prevention** – It is better to take action before harm occurs.
- **Proportionality** – Proportionate and least intrusive response appropriate to the risk presented
- **Partnership** – Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
- **Accountability** – Accountability and transparency in delivering safeguarding

## Principles

All supervision must link to annual and performance review systems of the organisation. The information discussed at supervision will inform and may be referred to during all appraisals and reviews. The provider organisation is required to have in place a Safeguarding Supervision Policy for adults and children. In addition, an annual safeguarding supervision schedule should be in place which in turn will inform the provider safeguarding assurance framework.

The key functions of supervision are:

- Management (ensuring competent and accountable performance/practice)
- Development (continuing professional development)
- Support
- Engagement/mediation (engaging the individual with the organisation)

- Assurance that practice is soundly based and consistent with Keeping Bristol Safe Partnership organisational procedures and national guidance that practitioners fully understand their roles, responsibilities and the scope of their professional discretion and authority

## Function

Models of supervision need to be appropriate for the type and nature of work delivered by our diverse agencies.

**Professional development:** through reflecting on practice, identifying training needs and enabling the practitioner to develop the skills and capabilities to do their job.

**Support:** by acknowledging that safeguarding work can be stressful and challenging, by providing the opportunity to offload and obtain support when coping with difficult situations and volumes of work and through recognising issues which might affect the ability to cope with the work.

Supervisors could specifically offer:

- debriefing discussions on the emotional impact of specific cases
- Facilitation of reflection on supervisees' feelings and personal struggles in aspects of their work which make them feel vulnerable as practitioners.
- Supervisors should aim to build an emotionally 'safe', supportive relationship with supervisees, which are positively perceived by them. This includes rapport, trust, confidence and enthusiasm
- Supervisors should consider how they can give emotional support in a way that does not increase feelings of burnout, but reflects on these feelings in a way that builds positive emotional outcomes
- effective feedback from supervisor to supervisee and how this also supports confident and safe practice, job satisfaction and retention.

**Management and Administration:** by providing a forum to recognise the required quality standards and by ensuring that collectively and individually workers are clear about their roles and responsibilities and the objectives they have to meet.

**Encouragement of Best Practice:** discovering and agreeing what works, acknowledging good practice and achievement and promoting evidence based practice.

**Challenge practice:** Hughes and Pengelly<sup>9</sup> refer to authority within supervision as having three aspects:

- role authority – this comes with the job and relates to the agencies responsibility that the supervisor carries
- professional authority – demonstrable confidence, knowledge and skills

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<sup>9</sup> Hughes, Lynette and Pengelly, Paul (1997) 'Staff supervision in a turbulent environment: managing process and task in front-line services', London: Jessica Kingsley, pp.202.

- personal authority – having the confidence through your own personal skills to discuss and carry out your professional role

All of the above promote development, good, trusting, honest relationships which will lead to having the confidence to challenge. This could lead to outcomes being changed as a result of discussion where for example other safeguarding issues are highlighted that require escalation or an approach that hasn't been explored needs appropriate action. Supervisors who feel confident in their own knowledge, skill base and professional authority are also more likely to facilitate discussions which challenge and stretch their supervisees. Additionally, the capacity of supervisors to feel confident enough in their role to admit the limits of their knowledge, including when to secure additional input for the supervisee, is crucial.<sup>10</sup>

**Assistance with change:** helping practitioners to operate effectively in environments of change and uncertainty.

### **Supervisors' expertise and training:**

- a positively perceived relationship with their supervisor and the extent to which this has helped them to be more effective in their work
- The provision of safeguarding supervision must be undertaken by practitioners who are trained to deliver supervision and who have expert knowledge of safeguarding
- The supervisory relationship is not a mode of performance monitoring; however, where issues around capability arise these must be addressed

**Organisations** may find it helpful to consider, implement and evaluate the following types of training for supervisors of front-line staff and for 'supervisors of supervisors:'

- supporting safe practice – an awareness of how supervisors can offer support to supervisees which takes account of effective safeguarding in case management
- professional leadership may be needed to ensure that support (including supervision) is appropriately accessed by all workers

It is advisable that supervisors are available at other times, offering an 'open door' where possible, and ad hoc and informal supervision when needed, within the constraints of the time available.

They need to consider how they can best create a culture that recognises the value offered by effective supervision at all levels. In turn, effective supervision may increase employees' perceptions of organisational support and improve their commitment to the organisation and its goals.

Organisations should offer alternative 'responsive out-of-hours systems', especially at times of crises and emergencies as well as regular telephone contact, in addition to scheduled supervision.

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<sup>10</sup><http://www.scie.org.uk/publications/guides/guide50/foundationsofeffectivesupervision/managingperformance.asp>

## **Policy and Procedure**

Practice and policy tell us that organisations should consider supervision as part of their 'duty of care.' In relation to this, a clear articulation of the purpose and practice of supervision embedded within communication.

Policies, procedures and professional standards should support the practice of supervision, and could be linked to other organisational policies such as sickness and absence, flexible working, health and wellbeing, whistleblowing, grievance, capability, etc., in order to promote and sustain good supervisory practice. Moreover, in order to maintain quality, it may be useful in supervision practice.

## **Frequency and Duration of Supervision Sessions**

All relevant staff and partner organisations are required to participate in regular management supervision. It is recommended that management supervision should take place six times in any 12 month period however the frequency and duration of supervision should comply with national or occupational standards where they exist, such as for clinical or child protection purposes.

In cases where supervision is cancelled, it must be rebooked immediately. If a manager finds that there is insufficient time for supervision sessions to take place, then advice should be sought from their line manager.

In instances where someone requires urgent supervision, arrangements should be made to action this within 24 hours.

It is important that meetings take place somewhere private and quiet and that there are no interruptions. The length will vary depending on the agenda, but a previously agreed adequate amount of time must be set aside. This must be of sufficient duration to enable quality discussion and may vary according to the needs of the supervisee..

## **Feedback, reflection and critical thinking**

Supervisors may wish to consider introducing clear and constructive feedback, reflection and critical thinking into supervision, balancing them appropriately with performance review and formal monitoring.

Practice suggests that reflection in supervision can involve critical thinking about practice with specific people. This includes identifying with the worker, any bias and assumptions they may be carrying or practices and behaviors that they exhibit as a result of interacting with specific people who use services.

Identifying barriers to effective practice within the organisation could also be discussed and be fed through supervisors to senior managers. Supervisors could give positive reinforcement through recognition and praise for work well done. It may be helpful if feedback is reciprocal. This could include:

- 360° feedback (perhaps including service user input)
- feedback from the supervisee to the organisation, and vice versa
- using the supervisor as a mediator in communication.



It should be recognised that there may be tension between honest feedback from the supervisee and the need for them to appear competent for performance appraisals.

### Recording

All supervision sessions should be recorded including areas such as:

- covered discussion points, agreed action plans, timescales and who the action is undertaken by
- they should be signed
- copies of the record should be available to both the supervisor and the supervisee and can be accessed by the supervisors manager or any other person with a reason to access the supervision record as deemed necessary within the relevant agencies code of conduct
- decisions made in supervision/management oversight should be recorded in case records

### Confidentiality

Records should be used purely for supervision purposes, are confidential and should:

- where the supervision is group/peer supervision, the notes are confidential to the members of that group
- Information may be shared with specific managers as detailed in the supervision agreement
- If information is shared with anyone else the member of staff must be informed that this is happening so that the member of staff understands what will be disclosed, the reasons for disclosure and the likely consequences, if appropriate

### Evaluation

Inconsistency in the quality of supervisions across agencies in Bristol has been picked as learning from a [Serious Case Review 2017](#) and therefore a robust system of ensuring the quality of supervision is required. Best practice would be for Supervision to be evaluated after an agreed period of time. Checking that the supervisee and supervisor are happy with the process is essential.

The key purpose of supervision is to assure the quality of the service being delivered and provide some means of being aware of how people who use services feel about what they are receiving from the organisation is in place. See Appendix 3 for an example of an Evaluation.

## Appendix 1: Checklist for Supervision Agreement

1. Parties to the agreement
2. Arrangements:
  - Frequency:
  - Duration:
  - Venue:
  - Type:
3. Function
4. Key areas for discussion e.g. individual cases, case-loads, engagement with stakeholders, team issues, operational issues, annual leave, sick leave, learning needs, training and personal development.
5. Confidentiality (*NB Supervision records, which are agreed, signed and dated, will remain confidential to the agreed managers and member of staff in line with the Data Protection Act. Sight of the records may be required by an authorised third party e.g. in the event of a future dispute, complaint, audit, investigation or court proceedings.*)
6. Accessing unscheduled supervision in urgent cases
7. Line management arrangements and where information may be shared
8. Disagreements and mediation arrangements (e.g. where there is a disagreement consider third party mediation)
9. Recording and signing
10. Links to performance management

## Appendix 2: Sample Recording Sheet for 1:1 supervision sessions

**NAME:**

**DATE:**

**JOB TITLE/ ROLE:**

**ACTIONS  
COMPLETED /  
OUTSTANDING  
ISSUES CARRIED  
FORWARD**

**Caseload management/Information Sharing/Recording on client's case file**

**Support issues**

**Professional development**

**Updated/Revised targets**

**Professional Judgement(s)**

**Actions agreed**

**Date and time of next meeting**

Signature of supervisor:

Signature of supervisee:

Date:

### Appendix 3: Evaluation of supervision conducted after a year or 4 sessions

1. Almost never      2. Occasionally      3. Often      4. Almost always

Quality of the Supervision Process	Supervisor	Supervisee
1. We negotiated a mutually acceptable contract specifying format, goals, roles/responsibilities and accountability of both parties.		
2. The supervisor/ee fulfilled his/her commitments as specified in the contract.		
3. The supervisor/ee maintained appropriate professional boundaries in the supervision relationship		
4. The supervisor/ee set and worked to an agenda for the supervision session, in consultation with supervisee/or.		
5. The supervisor/ee was reliable in making time for and punctual in attending the regular supervision sessions.		
6. The supervisor/ee placed a high priority on understanding the client's perspective, and regard for the client strengths.		
7. The supervisor used a range of questioning styles to assist the supervisee to explore and conceptualise issues and solutions		
8. The supervisor/ee worked together to formulate supervision questions and topics to discuss as required.		
9. The supervisor/ee kept a reflective journal to assist in the supervision process and the development of reflective practice		
10. The supervisor/ee communicated sensitivity towards cultural and ideological differences relevant to clinical practice.		
12. The supervisor/ee respected confidentiality issues, as appropriate.		
13. The supervisor/ee made supervisee/or feel valuable and respected as a colleague.		
14. The supervisor/ee sought feedback from supervisee/or about satisfaction with supervision.		
15. The supervisor/ee showed enthusiasm, dynamism and energy for clinical practice.		
16. The supervisor created an atmosphere of trust and support.		
17. The supervisor was available for crisis contact.		

18. The supervisor's supervision style was suited to supervisee level of clinical experience, learning style and needs of the supervisee.		
19. The supervisor encouraged presentation of supervisee's point of view and respected supervisee's opinions.		
20. The supervisor helped supervisee to identify their strengths and weaknesses relating to the core skills, knowledge, attitudes and competencies required for professional practice.		
21. The supervisor was flexible and adapted to changing needs of supervisee in supervision.		
22. The supervisor encouraged supervisee to examine ethical issues relating to practice, in line with professional codes of conduct.		
<b>Outcomes of Supervision</b>	<b>Supervisor</b>	<b>Supervisee</b>
23. Supervision improved supervisee clinical skills, knowledge, and attitudes relating to clinical practice.		
24. Supervision increased supervisee confidence as a practitioner.		
25. Supervision increased supervisee understanding of the organisation he/she works in.		
26. Supervision increased supervisee knowledge of ethical issues in practice.		
27. Supervision increased supervisee knowledge of National policies and procedures.		
28. What are the three most positive outcomes that have been achieved from supervision?		
i)		
ii)		
iii)		
29. What three things would you have preferred to have been done differently in supervision?		
i)		
ii)		
iii)		