

**NORTHAMPTONSHIRE CHILDREN’S TRUST**

**SUPERVISION**

**PRACTICE AND SERVICE**

**STANDARDS**

**INFORMATION SHEET**

|  |  |
| --- | --- |
| **Service area** | Northamptonshire Children’s Trust |
| **Date effective from** | October 2016 |
| **Date of review(s)** | June 2018  January 2020  April 2021 |
| **Status:**   * **Mandatory (all named staff must adhere to guidance)** * **Optional (procedures and practice can vary between teams)** | Mandatory |
| **Target audience** | All Northamptonshire Children’s Trust staff |

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# 1.1 Introduction

The purpose of supervision is to focus on developing and motivating staff for the benefit of the individual, the organisation as a whole and the families with whom Northamptonshire Children’s Trust work.

The national supervision framework for employers of social workers (October 2011) sets out the requirement: ‘to ensure that social workers have regular and appropriate supervision’.

The purpose of this Supervision Policy is to provide Northamptonshire Children’s Trust staff, and in particularly social workers, as well as Early Help and Prevention staff with a common framework and clear expectations for supervision so that they can deliver positive outcomes for children and families.

This policy has been written for all Northamptonshire Children’s Trust services who manage casework, in most cases it refers to the standards for oversight of social work but is designed to ensure consistent supervision practice across both areas of practice (and so throughout should be read with this in mind). It is designed to guarantee minimum supervisory standards and to help all involved be clear about what to expect from supervision.

The supervision policy is guided by The Social Work Care Standards Act 2000. It is also drawn from a theoretical basis in the work of Morrison, T, & Wonnacott, J (2010) and Kolb’s (D) (1984) Reflective cycle and supported by research and methodology taken from Research in Practice (RIP), in particular a pilot Reflective Supervision Change Project, [Link to Research in Practice-Reflective Supervision Resources](https://www.rip.org.uk/resources/publications/practice-tools-and-guides/reflective-supervision-change-project-pilot-resources/)

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The effective application of this policy will be audited through the [Quality Assurance Framework](https://proceduresonline.com/trixcms1/media/10042/quality-assurance-framework-updated-december-2020.docx)

# 1.2 Definition of Supervision

Supervision is a fundamental part of effective social work practice; it enables reflective practice to occur and ensures that evidence based practice is followed. Supervision is an ongoing process in which workers receive guidance, support and challenge in a formal setting. It provides the opportunity for workers to think, explore and confront issues that are pertinent to their ability to perform their role to the expected standard. It is also a mutually beneficial exchange which allows managers and staff to explore what, why and how work is undertaken and managed within the overarching framework of Northamptonshire Children’s Trust’s objectives, values and priorities - particularly working in the best interests of the child.

Through supervision, managers of Children’s Social Care staff (including Early Help and Prevention) ensure that Northamptonshire Children’s Trust accountability is properly exercised in accordance with its legal obligations.

Formal supervision is provided in a regular meeting between the supervisor and supervisee in order to meet organisational, professional and personal objectives. Informal and peer supervisions may also be used to support practice but they cannot and should not replace planned, formal, recorded one to one sessions.

Peer learning and group reflective supervision within teams may be used to compliment the formal supervision.

# 1.3 The Purposes of Supervision

* To ensure the quality and standard of the service delivered to the user.
* To promote the development and skills of social work and all field work staff.
* To establish accountability for the work of Children’s Services.

The National Supervision Framework specially requires that supervision covers;

* Quality of decision making and interventions
* Line management and organisational accountability
* Caseload and workload management
* Identification of further personal learning, career and development opportunities

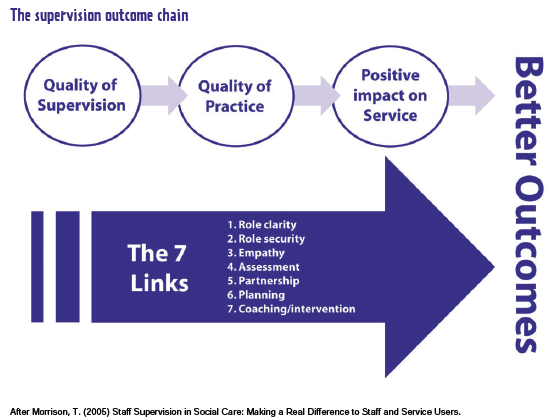
# 1.4 Principles of Supervision

* The best interest of the service user is at the heart of the process
* Supervision is an explicit departmental and national (Social Work England) requirement
* All members of staff require supervision on a regular basis
* Supervision is a shared responsibility to deliver the most effective service
* Supervision promotes competent, accountable and empowered practice
* Supervision promotes anti oppressive practice

Supervision should help to ensure that practice is sound and consistent with the Northamptonshire Safeguarding Children Partnership (NSCP) <https://www.proceduresonline.com/northamptonshire/scb/>

# 1.5 Good supervision leads to good outcomes

Good supervision requires a planned and staged process including the 7 Links referred to in the diagram below. Supervisors need to ensure that the social worker is clear about their purpose, role and responsibility and only through this can they achieve positive outcomes.



At the same time, the social worker (staff member) needs to be supported to be confident and clear to carry out the tasks planned. It is crucial that the supervisor has the skill to identify any such concerns and to build up the practitioner’s confidence.

Supervisors should identify the stage of development of their staff and work to develop the practitioner’s knowledge, skills and confidence. The supervisor should be developing the worker’s practice skills; this may be done through co-working a case or providing observation and feedback of the worker or through setting up other coaching, co-working, or other observational opportunities.

Supervision should also consider individual learning styles.

# 1.6 The Policy context

As well as the British Association of Social Workers (BASWs) supervision policy statement (2011); in 2014, the Department for Education published the Knowledge and Skills Statement for Child and Family Social Work. It is intended as ‘a catalyst for major systemic change’ and the foundation of a national assessment and accreditation system for three levels of professional practice: Approved Child and Family Practitioner, Practice Supervisor and Practice Leader. The final statements for Practice Leaders and Practice Supervisors were published in November 2015.

The knowledge and skills statement for Practice Supervisors (DfE, 2015) covers the following areas:

1) Promote and govern excellent practice

2) Developing excellent practitioners

3) Shaping and influencing the practice system

4) Effective use of power and authority

5) Confident analysis and decision-making

6) Purposeful and effective social work

7) Emotionally intelligent practice supervision

8) Performance management and improvement

# 1.7 Reflective Supervision

Reflective supervision supports the supervisee to reflect on situations that require a deeper understanding. Reflective supervision can also be undertaken as group supervision. It allows staff to take a step back from the work and examine it differently.

NQSWs within the organisation received separate ASYE reflective supervision; this is facilitated by the Professional Social Work Educators in the Social Work Academy

In recent years there has been a resurgent understanding of the fundamental importance of relationships and strengths-based direct work in safeguarding and supporting change for children and families (Munro, 2008 and 2011; Care Inquiry, 2013; Featherstone et al, 2014).

Supporting reflective practitioners requires a different kind of supervision that can provide:

* Containment for practitioners’ emotional responses to direct practice experience.
* A space in which practitioners can build their capacity to think and analyse complex situations, which may be dominated by anxiety about risk.
* A means for practitioners to engage and make use of their own experience and develop awareness of how their experience informs their practice.

(Morrison, 2001; Sheppard, 1998)

Reflective supervision ‘locates the supervisee as the “driver”’ while the supervisor ‘shifts from being an “expert” to become a “facilitator”’ (Davys, 2013). The process should empower the supervisee to retain ownership of solutions, with the supervisor offering supportive, constructive challenge to develop existing strengths and build up areas for development in an ‘interactive dialogue’ which ‘shapes a process of review, reflection, critique and replenishment for professional practitioners’ (Davys and Beddoe, 2010: 21).

Appendix E provides an example of reflective questioning that can be used in supervision.

Gibbs’s reflective cycle (1988) builds on Kolb’s work to develop a reflective cycle which suggests questions a practitioner might ask themselves, or a supervisor might ask of them, in order to encourage critical reflection.



**Six principles of reflective supervision**

1. To deepen and broaden workers’ knowledge and critical analysis skills.

2. To enable confident, competent, creative and independent decision-making.

3. To help workers build clear plans that seek to enable positive change for children and families.

4. To develop a relationship that helps staff feel valued, supported and motivated.

5. To support the development of workers’ emotional resilience and self-awareness.

6. To promote the development of a learning culture within the organisation.

# 1.8 Links to other policies and procedures

This supervision policy needs to be operated alongside other Northamptonshire Corporate and Safeguarding Children Services Policies and Procedures such as induction, probation period, performance appraisal and development reviews (PADPs), continuous professional development needs (CPD), managing absence and health and safety. It also links to the [Recording Policy and Guidelines](https://northamptonshirechildcare.proceduresonline.com/g_recording_guide.html).

Details of related policies can be found online <https://northamptonshirechildcare.proceduresonline.com/index.html>

**1.9 Good practice in undertaking supervision**

* Staff well-being will be discussed and recorded as the first agenda item
* Supervision is a right, it is both the responsibility of the supervisor and supervisee to make this happen. It must take place at least monthly
* Training & Development, including appraisal targets, will be discussed at each supervision.
* Both supervisor and supervisee should agree the agenda for supervision in advance of the meeting (no surprises).
* Supervisees and supervisors should attend prepared for the session.
* Actions from previous supervisions will be tracked within supervisions until they are completed.
* Supervision record is not completed until both parties have signed their agreement.
* Cases will be anonymised (ID numbers) and any decisions recorded into the CF record (as appropriate).
* Performance concerns will be noted along with SMART action planning to address identified issues.

# 1.10 Supervision Agreement

A suitable Supervision Agreement is contained in Appendix A and Supervision Standards are laid out in Appendix B

The purpose of the supervision agreement is to establish the basis on which the supervisor and supervisee will work together during one to one supervisions. This establishment of “ground rules” should be through negotiation and should clarify the rights and expectations on both sides to create a safe, secure and effective supervisory setting.

When establishing the supervision agreement, the following will be discussed:

* the purpose of supervision
* the frequency of supervision
* the specific responsibilities of both supervisor and supervisee
* the preparation required before a session including agenda setting, producing summaries, reading
* the recording of supervision, including where records will be kept to safeguard confidentiality, how quickly records will be given to the supervisee for signature.
* the arrangements for any informal supervision
* how any difficulties with supervision will be resolved
* how and when the agreement will be reviewed
* the practical arrangements (e.g. the process if supervision has to be cancelled/rearranged, an agreement that supervision will be uninterrupted, the anticipated length of time for each session)

# 1.11 Frequency and length of sessions

The minimum frequency for formal supervision is monthly for social workers, and all other fieldwork staff working directly with children. For managers the minimum frequency for supervision is also monthly. However, supervision frequency also needs to be tailored to the developmental and professional needs of the social worker/staff member and a higher frequency will be appropriate according to the stage of professional development, the complexity of the workload and, in some cases, the particular circumstances of the supervisee. All new cases should be discussed in supervision within a month of allocation to the Social Worker/staff member.

In addition, whole team reflective group supervision is to be encouraged on a monthly basis. Two examples of models that can be used to support this activity are referenced in appendices F & G. Further examples are available on the website. A maximum of two and a half hours is recommended to ensure adequate time for reflection. If sessions are effectively managed and prepared in accordance with this policy, this time frame will be manageable.

Supervisors should also make themselves available to offer advice and guidance outside the formal supervision sessions. Informal supervision must not replace formal planned sessions, however can be used to evidence decision making that may change the direction of a case. All case decisions must be recorded on the electronic case file under either (Carefirst) C-Case discussion or C- decision – management heading or (Capita) comms log – management oversight, they are not formal supervisions and therefore should not be recorded as such.

Where there is a member of staff co- working a case joint supervision should also take place as a minimum of every eight weeks. The frequency of case supervision may be increased at the workers request or manager’s discretion.

Newly Qualified Social Worker’s will receive formal supervision on a weekly basis for the initial six weeks and then fortnightly for the remainder of their ASYE year. Formal supervision consists of both personal and case supervision with their line manager and reflective supervision with their Professional Social Work Educator.

In any one year the supervisor should arrange to undertake two practice observations for all case holding staff, some examples of which may include a home visit, presentation at case conference/meeting, attendance at court or direct work with children. The observation should be recorded appropriately on the electronic case record as practice observation. The observation completed could be in conjunction with the [Quality Assurance Framework](https://proceduresonline.com/trixcms1/media/10042/quality-assurance-framework-updated-december-2020.docx) process and the same template should be used for both.

**1.12 Frequency of supervision in respect of children and young people**

The following explains the frequency of supervision dependent on the child’s status and should be recorded on their file following the recording guidance below.

* Leaving Care (18+) – bi-monthly supervision recorded on young person’s file.
* Early Help and Prevention team – bi monthly supervision
* Private Fostering case– bi-monthly
* Post Order – at a minimum of tri-monthly, but should be recorded on file the frequency dependent on the level of involvement.
* Child in Need – bi-monthly (including during the first month of allocation)
* Child Protection – monthly
* Children in Care (including in care proceedings, and short breaks) – monthly
* Children in permanent foster care (ratified by panel) – bi-monthly (this should only happen once the child has been in the placement a year and the visits have reduced to 12 weekly).
* Children with disabilities – Family Support – bi-monthly
* Children with disabilities – Family Support Direct payments – tri-monthly.

Depending on the complexity of the case or needs of the supervisee, the frequency of supervision can be increased at the request of either the supervisee or supervisor.

**1.13 Frequency of supervision in respect of Foster Carers and Adopters**

* Adopters – monthly (recorded on Adopters file).
* Foster Carers – monthly accept if the placement is ‘long term’ and then this takes place tri monthly, but can be more frequent as required.

# 1.14 Recording of Supervision

Supervisors must prepare for supervision by having the individual workers case load list available from BIPI or Carefirst. This is to ensure all cases are prioritised for discussion along with follow up of outstanding actions and timely throughput to Step down or case closure.

Supervisees must prepare for supervision by covering the following sections in the Carefirst observations ‘Supervision’ dropdown;

* What are we worried about;
* What’s working well;
* Voice of the Child

for every child on their case load. When a case is first allocated this will potentially be a lengthy task however completion of subsequent observations can be by way of update only, unless a new episode occurs such as a child becoming looked after.

During supervision, supervisors along with the supervisees, must cover the following sections in the Carefirst observations ‘Supervision’ dropdown;

* Actions reviewed from previous supervision;
* Analysis / Reflection;
* What needs to happen

All supervision sessions, including group sessions, must be recorded. Case supervision for children will be recorded in the ‘Supervision’ dropdown available in Carefirst observations, unless the case is for a child whose records are on Capita. In this instance, the Case Supervision pro-forma must be used - see appendix D1. In order to ensure all sections are covered when completing case supervisions for children on Carefirst, appendix D3 must be used, and its content must be copied and pasted into the Carefirst observation ‘Supervision’ dropdown.

Pro-formas for recording both staff (personal) supervision and case supervision of fostering/adoption cases are included in the appendices – see Appendix C and D2, respectively. The Personal Supervision Record (Appendix C) should be agreed and signed by both parties and held on the staff supervision file. The case discussion record prepared by the worker (Appendix D depending which area of the service) should be uploaded to care store.

If a supervisor is unable to type directly onto the electronic case record system, then a word document should be used with the above headings and placed on the child’s file within 24 hours. This should be put into Carefirst observations under the heading C - Case – supervision. For Early Help and Prevention this should be recorded on Capita under a comms log – management oversight.

Records of reflective supervisions / lengthy detailed supervisions (character count) or case mapping can be recorded in Case Observations (C-Case Supervision) and signposted to word documents uploaded to CareStore.

Discretion can be used as to the depth of discussion on some cases; for example, if a case has had a number of informal discussions in the preceding month, which have been recorded at the time, then a supervision record on Carefirst can be noted to this effect and reference made to the case supervision record uploaded to CareStore containing the updated information on case progression. (Appendix D1)

Supervisors have the responsibility to ensure that each worker has an up to date Personal Appraisal and Development Programme (PADP) which is reviewed at regular intervals throughout the year. The worker is responsible for maintaining their own CPD record, also known as a Learning Log (required for Social Work England registration).

# 1.15 Staff Supervision File (held by Supervisor)

All staff should have a personal supervision folder (confidential electronic records on SharePoint) each contains:

* Front Sheet with dates of supervision and basic information
* Supervision Agreement
* The workers CPD record or Learning Log
* Staff information such as date of last Disclosure and Barring Service (DBS) check, Social Work England registration, PADP, Next of Kin details etc.

Matters arising with regard to the following must always be shared and recorded:

* Issues concerning staff performance and conduct
* Case issues which have the potential to/or have generated a complaint from a service user
* Learning from case file audits and serious case reviews
* Issues concerning safety of service users and staff
* Matters involving legal issues affecting the service or the supervisee
* Annual Personal Development Plans which are shared with staff and workforce development team
* Supervision files are available to inspectors who may wish to review them as part of the inspection.

The supervision records will be stored for the duration of the employees’ period of employment and will be accessible to both the supervisor and supervisee as a reference tool.

Upon the employee leaving Northamptonshire Children’s Trust the supervision record will be retained for 10 years in accordance with the Record retention guidelines before being destroyed.

# 1.16 Quality Assurance – ensuring the quality of supervision

The following measures will be used to monitor the quality of supervision:

* All supervisors will receive training for supervision.
* Supervisors will be encouraged to seek feedback from their staff.
* Staff will be encouraged to comment about supervision via an annual survey.
* Supervision Audits and Observation

## 1.17 Audits

When used well, audit can be a useful mechanism and should be:

* Proportionate – not everything needs to be looked at and not always at the same depth.
* Focused on *outcomes* not *outputs.*
* Placing the needs of children and families at the centre – audits should not distort practice by making people focus on things that are not important to service users.
* Used to inform and improve practice and service delivery.
* Motivating in recognising and improving good practice, rather than being punitive – audits should not negatively affect staff morale!

(Munro, 2008)

For details of pro-formas used in the audit process refer to the [Quality Assurance Framework](https://proceduresonline.com/trixcms1/media/10042/quality-assurance-framework-updated-december-2020.docx)

# 1.18 Resolving Supervision Difficulties

The manager of each supervisor is responsible for reviewing and considering the quality and effectiveness of supervision which is being provided to every social worker on a regular basis. Every supervisor should regularly check with their supervisees that the process is meeting their needs. Supervisees who have concerns about whether their supervisory needs are being met should first speak to their supervisor about this. However, if the issues cannot be resolved by discussion with the supervisor the supervisee should raise the issue with their supervisor’s manager named in the supervision agreement.

# Appendix A – Supervision Agreement

|  |
| --- |
| **Supervision Agreement** |

|  |  |
| --- | --- |
| Supervisee: |  |
| Job Title: |  |
| Service Area: |  |
| Supervisor: |  |

1. **Frequency**

Formal supervision will be held monthly. If a supervision session needs to be rearranged it should only be done by mutual consent and should be rescheduled within 7 working days to ensure supervision is not missed. The reason for the postponement will be recorded in the supervision record.

1. **Duration**

Supervision sessions will last for approximately 120 – 150 minutes; if this time proves insufficient to effectively cover the agenda, the session will be extended subject to the consent of both parties and an additional session arranged.

1. **Venue**

Supervision sessions will take place at a venue agreed by both parties and where interruptions can be avoided or kept to a minimum. To assist this, telephones will be diverted, unless otherwise agreed.

1. **Agenda Setting**

The agenda will be agreed by both parties at the outset of supervision. The agenda will also include ‘standing items’, which require regular consideration and reflect the respective roles and responsibilities of the supervisee and supervisor. The standing agenda will also identify documents and information the supervisee is required to bring to each supervision session.

It is the supervisor’s responsibility to ensure that the discussion remains within the boundaries of the agenda and fulfils the aims and objectives of supervision as set out in the supervision policy document.

1. **Recording**

A record of the discussion and action’s agreed within supervision will be kept using the supervision record document. Recording of supervision will be the responsibility of the supervisor.

The record will be typed and a copy given to the supervisee. The supervisor will maintain a supervision file for each supervisee which is kept securely.

1. **Responsibilities**

Both the supervisor and supervisee have responsibility to ensure they have read and understood the supervision guidance issued to them as detailed in the supervision policy document.

1. **Learning and Development**

Supervisees have a responsibility to prepare for supervision by providing evidence of progress and identifying personal and professional developmental issues. The supervisor will in turn work with the supervisee to identify training and developmental needs and explore how these needs can best be met.

1. **Performance Issues**

Any issues regarding a supervisee’s performance will be identified at an early stage so that clear targets for improvement and supportive actions can be established, minimising any potential impact on service delivery.

Informal Performance Plans will be considered as part of the process and if required implemented. Formal Performance Plans will also be implemented if required.

Consultation with HR will take place when Formal performance plans are required.

1. **Confidentiality**

Supervision sessions and records are confidential, both in terms of professional confidentiality and within the principles of the Data Protection Act. Access to supervision information and records will be restricted to the supervisor and can only be examined by another person as part of other management activity e.g. audit, inspections, investigations.

Both parties will agree how any issue of a personal nature will be recorded and actioned.

1. **Dealing with Disagreement**

Disagreements may arise about casework, other decisions and about the supervisory relationship. In these instances, it is essential that such points of view are openly explored and recorded. If these issues cannot be resolved within the supervisory relationship they should be referred to the supervisor’s manager.

All supervision issues should be conducted in a respectful manner by both parties.

1. **Areas for discussion in Supervision**

**Previous supervision actions**

Individual cases - Inc. timescales for visits, core groups, sharing of reports etc. – Recorded

Staffing issues including staff development, absence monitoring, workloads

Budget monitoring

Learning & development

TOIL & Annual Leave,

Absence/ sickness

File Transfers

Any other issues

Audits

SCR Outcomes

This agreement should be renewed by both parties on an annual basis in (month/year)

|  |  |  |  |
| --- | --- | --- | --- |
| **Supervisor** |  | **Supervisee** |  |
| **Name:** |  | **Name:** |  |
| **Date:** |  | **Date:** |  |

# Appendix B- Supervision Standards

## General

1. Supervision takes place between a member of staff (supervisee) and their line-manager (or designated person). It is a one-to-one event.
2. Group reflective supervision should also be used in addition to supervision to complement it, but it must not replace one-to-one supervision.
3. All managers should formally supervise all staff for which they are responsible or nominate someone suitable to perform this task on their behalf.
4. A Supervision Agreement should be drawn up jointly at the beginning of every supervisory relationship and must be adhered to by both parties.
5. All staff will receive regular supervision which will be underpinned by The Children and Young People Strategy, The Children and Young People Plan, Service Plans and Service Specifications.
6. Supervision must not be; rushed, interrupted, one-sided, focused on the supervisor’s needs, negative or demoralizing or unsupportive.
7. Frequency of supervision should be specified in the Supervision Agreement and follow the following pattern: Strategic Managers, Service Managers, Team Managers, Practice Managers and Social workers, Family Support Workers, Early Help Practitioners & Personal Advisors– every month. Newly qualified staff should receive weekly supervision for the first 6 weeks and then fortnightly supervision for the remaining first 12 months.
8. Supervision can be more frequent if either the supervisor or the supervisee feels this is necessary.
9. Supervision should be treated as a priority and should be planned for by both the supervisor and the supervisee.

## Supervisors Responsibilities

1. To be familiar with this Policy and to undertake supervision training in order to provide the supervisee with management, development, mediation and support.
2. To make supervision a priority and to be accessible to the supervisee to ensure that their cases are discussed, reflected upon, analysed and plans and action are agreed.
3. To ensure the supervisee understands their role and responsibilities and to support them in the exercise of that role.
4. To ensure appropriate induction and training is planned, supported and monitored according to the supervisee’s needs.
5. To quality assure the supervisee’s work and to assess performance and give constructive feedback.
6. To address continuing poor performance issues and implement capability procedures if necessary.
7. To use performance management data to benchmark division/team performance against local and national standards.
8. To be open and honest at all times and to be clear that supervision is part of the accountability framework for social work practice.
9. To accept constructive criticism positively.
10. To monitor absence from work and explore any issues arising.
11. To respond appropriately to personal problems that may affect the supervisee’s wellbeing and work performance.
12. To respond appropriately to any issues regarding equalities considerations and opportunities for the supervisee or service users.

## Supervisees Responsibilities

1. To make supervision a priority and to prepare appropriately for it this will include case reflection.
2. To ensure that requested actions are completed to the standard and timescale requested.
3. To demonstrate professionalism by showing commitment to the development of knowledge and expertise.
4. To use performance management data positively to monitor their own performance against Directorate and national standards.
5. To inform the supervisor of any issues arising within their team/area and seek guidance when necessary.
6. To accept constructive criticism positively and take the necessary action to improve performance.
7. To give the supervisor constructive feedback on their supervisory role.
8. To raise any issues around equality of opportunity experienced or observed.

## Senior Managers Responsibilities

1. To be familiar with the supervision policy and guidelines
2. To monitor and evaluate the standard of the supervisory process
3. To ensure that supervisors and supervisees are fulfilling their responsibilities and that the desired outcomes are being achieved.

# Appendix C– Personal Supervision Record

|  |  |
| --- | --- |
| **Personal Supervision Record**  **CONFIDENTIAL** | |
| Name of Supervisee: |  |
| Name of Supervisor: |  |
| Date of supervision: |  |

|  |  |
| --- | --- |
| **AGENDA** | |
| Actions completed from last supervision: | |
| 1. **What’s working well? (health, safety, personal matters)** | |
|  | |
| **2. Tell me about something you have completed within your work in the last month that you are proud of?** | |
|  | |
| **3. What are your worries? (work, health, safety, personal issues – that might be impacting on your work)** | |
|  | |
| **4. Management of work (include specific examples, workload management, priorities; how are you doing with this?)** | |
|  | |
| **5. Development Opportunities (include training and development needs and requests, feedback on performance, knowledge, competencies). What impact has this had on your work?** | |
|  | |
| **6. Time Management, leave, toil, sickness and absence** | |
|  | |
| **7. On a scale of 0-10, 10 being that everything to do with work is really good, and you feel happy and 0 is that you feel really unhappy about work, and how things are going that you really don’t want to be here, where would you be today?** | |
| |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **0** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | |  |  |  |  |  |  |  |  |  |  |  |   What would be different for you if you were to move up the scale one? | |
| **8. ‘Next Steps’ and agreed actions:** | |
|  | |
| **Read, agreed and signed by:**  *(Any disagreements should be noted below with an action/timescale for follow up – this to be concluded prior to next supervision where possible)* | |
| **Supervisee:** |  |
| **Supervisor:** |  |
| **Date of next supervision:** |  |

**Once agreed and signed by both parties, this record must be held on the Staff Supervision File.**

# Appendix D1 Case Supervision

|  |
| --- |
| **Case Supervision**  **CONFIDENTIAL** |
| ***Front Sheet:*** *To be completed at first supervision and updated/checked by the worker bi-monthly and reviewed.* |
| **Supervisor:** |
| **Supervisee:** |
| **Date allocated to the team:** |
| **Child’s Name and ID number:** |
| DOB: |
| Legal status: |
|  |
| Passport: |
| Birth Certificate: |
| **Actions reviewed from previous supervision** |
| **Why are we working with this child?** (Danger/Worry Statements) |
| **What are we trying to achieve?** (Safety/Stability/Success Goals) |
| **Date of supervision:** |
| **Supervisor:** |
| **Supervisee:** |
| **Child’s name and ID:** |
| **What’s working well?** *(To be completed prior to supervision by worker)* |
| **What are we worried about?** *(To be completed prior to supervision by worker)* |
| **The child (Voice/Choice)** |
| **Last seen**: **Seen alone?** Y/N |
| **The Family (Voice/Choice)** |
| **Scaling**   |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **0** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | |  |  |  |  |  |  |  |  |  |  |  |   ***On a scale of 0 to 10 where 10 is there no real worries about the child and***  ***0 is there are serious concerns where would you scale this today?*** |
| **To get to the next step on the scale, what would be different for the child/family?** |
| **Analysis and reflection** *(Breaking down the information above to evidence decisions being recommended – what does this mean for the child/family and what is the progress towards the safety/stability/success goal)* |
| **What needs to happen?** *(Next steps and actions)* |
| **Agreed frequency of visiting child or family:** |

# Appendix D2 Case Supervision – Fostering/Adoption Teams

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| --- |
| **Case Supervision – Fostering and Adoption Teams**  **CONFIDENTIAL** |
| ***Front Sheet:*** *To be completed at first supervision and updated/checked by the worker bi-monthly and reviewed.* |
| **Supervisor:** |
| **Supervisee:** |
| **Date carer approved:** |
| **Carer’s Name and ID number:** |
| DOB: |
| Approval status: |
|  |
| DBS date: |
| Medical date: |
| TSD completed? |
| **Need to know information:** (any allegations, safeguarding issues, complaints, compliments, exemptions, approval variations?) |
| **In relation to placements: Why are we working with this child?** (Danger/Worry Statements)  **What are we trying to achieve?** (Safety/Stability/Success Goals) |
| **Date of supervision:** |
| **Supervisor:** |
| **Supervisee:** |
| **Care’s name and ID:** |
| **What’s working well?** *(To be completed prior to supervision by worker)* |
| **What are we worried about?** *(To be completed prior to supervision by worker)* |
| **The voice of the carer/family:** |
| **Last seen**: **Last unannounced visit:** |
| **The voice of the child in placement:** |
| **Scaling**   |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **0** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | |  |  |  |  |  |  |  |  |  |  |  |   ***On a scale of 0 to 10 where 10 is there no real worries about the placement and***  ***0 is there are serious concerns where would you scale this today?*** |
| **To get to the next step on the scale, what would be different for the situation?** |
| **Analysis and reflection** *(Breaking down the information above to evidence decisions being recommended – what does this mean for the child/family and what is the progress towards the safety/stability/success goal)* |
| **What needs to happen?** *(Next steps and actions)* |
| **Agreed frequency of visiting the placement:** |

# Appendix D3 Case Supervision – Carefirst

|  |  |
| --- | --- |
| **Case Supervision – Carefirst**  **CONFIDENTIAL** | |
|  | |
| **Actions reviewed from previous supervision** (Team Manager to complete with Social Worker in supervision) | |
| **What are we worried about?** *(Social Worker to prepare in advance of supervision)* | |
| **What’s working well?** (Social Worker to pare in advance of supervision) | |
| **Voice of the Child** (Social Worker to prepare in advance of supervision) | |
| **Analysis and reflection** (Team Manager to complete with Social Worker in Supervision.) *(Breaking down the information above to evidence decisions being recommended – what does this mean for the child/family and what is the progress towards the safety/stability/success goal)* | |
| **What needs to happen?** (Team Manager to complete with Social Worker in supervision) *(Next steps and actions)* | |
| **Scaling**   |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **0** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | |  |  |  |  |  |  |  |  |  |  |  |   ***On a scale of 0 to 10 where 10 is there no real worries about the child and***  ***0 is there are serious concerns where would you scale this today?*** | |
| **To get to the next step on the scale, what would be different for the child/family?** | |
| **Date of supervision:** |
| **Supervisor:** |
| **Supervisee:** |

# Appendix E – Useful Questions to guide supervision-prompts for reflective practice

## 1. **Focusing on experience**

These questions aim to support accurate and detailed recall of events. A partial description of the situation can cause problems later in the cycle, but the right questions can help workers recall more detail, more accurately.

* What was your aim? What planning did you do? What was your role?
* What did you expect to happen? What happened?
* What did you say and do? What did the user say, do or show?
* What were the key moments and what stuck out?
* What words, non-verbal signals, interactions, sounds, images or smell struck you?
* What or who was hard to observe and what observations or concerns do other agencies have?
* What went according to plan and what didn’t happen?

## 2. Focusing on reflection

The questions aim to draw out feelings, they may bring out further information or may reveal the social workers underlying attitudes. They may also give clues about the personal factors complicating the social worker’s responses.

* What did you feel at the start of the visit/interview?
* Describe the range of feelings you had during the session and what did these remind you of?
* What patterns did you see in the visit? Are these familiar and have you encountered similar processes?
* Who/what does this user remind you of?
* What do you think the user was feeling? Based on what?
* Where and when did you feel most or least comfortable?
* What thoughts/ideas went through your mind during the session?
* What are the similarities/differences between this contact and your previous contact?
* What was left unfinished?

## 3. Focusing on analysis

These questions help with analysis by probing the meanings given to situations by the supervisee and user. They may help you identify what is not known or understood and lead to areas for further assessment.

* List three assumptions you, the co-worker or the user brought to the session.
* How do you define your role in this situation and how does your employer define it?
* What aims/outcomes for this session were or were not achieved?
* What went well, or not well and why? What other, possibly unexpected outcomes, did the session produce?
* How far did the session confirm or challenge your previous understanding or hypothesis about this situation?
* What new information emerged? What is not known?
* What bits of theory, training, research, policy or values might help you make sense of what was happening in this session?
* What areas of further assessment are required and what conclusion are you drawing from this work so far?

## 4. Focusing on action plans

These questions help translate the analysis into planning, preparation and action by identifying outcomes and success criteria as well as considering potential complications and contingency plans.

* In light of the reflection and analysis we’ve done, what’s your overall summary of the needs, strengths and risks for the service users in this situation?
* What are you responsible for in managing this situation and what needs obtaining before proceeding?
* What is urgent and essential? What would be desirable?
* What would be a successful outcome of the next session from your perspective? The user’s perspective?
* What are the best or worst responses from the user?
* What contingency plans are needed, what is the bottom line?
* Who needs to be involved (co-worker, supervisor, agency)? What would you like from them?
* Any safety issues for you or others? What can be done to minimise the dangers?

# Appendix F - Systemic Reflective Space – A Model for reflective group supervision

Systemic Reflective Space (SRS) is a model of group supervision developed through a small-scale practitioner led qualitative research project to develop a ‘reflective space’ for a multi-disciplinary children’s services team (Jude and Regan 2010). The approach is rooted in Tom Anderson’s (1987) work on reflecting team and is adapted here by Child Centres Practice and Research in Practice.

Systemic Reflective Space seeks to create space to explore lived experiences, gut feelings and human ways of knowing. It does this by:

* Developing professional practice that requires practitioners to share their skills, competence and abilities thus inviting collaborative and reflective practice.
* Providing an alternative view on aspects of a practitioner’s work and offering an opportunity for the practitioner to explore a variety of options in their practice, to facilitate learning and help transform practice.
* Developing professional practice that requires practitioners to share their skills, competence and abilities thus inviting collaborative reflective practice.
* Providing an alternative view on aspects of a practitioners work and offering an opportunity for the practitioner to explore a variety of options in their practice, to facilitate learning and help transform practice
* Focusing on strengths and diversity of participants (Jude and Regan, 2010:11)

Ground Rules

In order to facilitate the process, team members are encouraged to:

* Reflect at the presenter’s pace
* Connect comments to material that has been presented
* Be mindful of negative feedback
* Talk in a way that enables the presenter to listen
* Listen in a way that enables the presenter to give feedback
* Ideas should be presented tentatively and not as solutions (Jude and Regan, 2010:11)

The reflecting team conversation should not mirror what the presenter has discussed, but offer alternatives to enable sufficient difference to emerge.

**Getting Started**

In groups of six, nominate one person to a practice issue

1. **One participant presents a practice issue**

The issue is presented in a story form- first of all from the point of view of the practitioner, then from the point of view of the service user and then from the point of view of any other key players.

Presentation of the story should only take about 15 minutes. The practitioner can draw on resources such as pictures, objects and role play to tell it.

The other members of the group pay attention to how the presenter talks about the issue. Their focus should be on the emotional listening.

Emotional listening requires a willingness to let others dominate a discussion and attentiveness to what is being said.

Emotional listeners take care not to interrupt, use open/ended questions, reflect sensitivity to the emotions being expressed, and have the ability to reflect back to the other party the substance and feelings being expressed.

1. **Presenter silently observes the rest of the group in discussion and sits outside the circle.**

No questions are asked or answered at this stage. All participants must learn to ‘Sit with uncertainty’. This involves a willingness to continually challenge one’s own assumptions and place knowledge in the context of values, past experiences, feelings and relationships to test them out.

1. **The group converses and explores the issue using stories, visual aids and role play.**

The group adopts an exploring (not a ‘solving’ or ‘expert’) stance. The aim of the exercise is to explore different ways of understanding the presenting dilemma and why their own attention has landed on the story in the way it has.

‘What else could it be?’ is a helpful way for them to think about what has been presented along with asking ‘How is the dilemma the same as one I have experienced?’ More importantly, ‘How is it different?’, a useful way for members of the group to check out that they are not relying too much on similar experiences of their own, or the shared wisdom of the organisation.

1. **What is known an unknown?**

The group works to capture the ‘known’ and ‘unknown’ areas of the original presentation, including presumptions. (What we sometimes call ‘thinking’ can be a rearranging of our own prejudices and beliefs). The group generates a list of ‘curious’ questions the presenter should consider. However, they do not ask the questions and the presenter does not answer them; the presenter remains outside the circle, listening.

1. **Presenter comments on the group’s discussion**

The presenter responds to the different discussions, viewpoints and questions generated, talking about what captured their attention and why. The group is to listen in silence to these points

The presenter tries to remain curious about what they are attending to and how they felt with each response (reflection in action). They will use the below sentence structure to guide their responses:

*“The first thing I noticed from your discussion was…”*

*“It made me feel like…”*

*“Now I realise that…”*

*“This is what I would like to do about that…”*

1. **Group discussion**

During this period the whole group including the presenter reflects on why different perspectives have emerged- or why they have not emerged, if there have been no alternative perspectives. The group checks in that they are feeling OK and explores the usefulness of the process.

Source: adapted from Jude and Regan (2010)

# Appendix G – Decision making hats tool - A Model for individual and group reflective supervision