



SUPERVISION POLICY & TOOLS

Supervision Guidance Children's Services Directorate

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Standard document control

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Supervision Policy – Children’s Social Care

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I. Introduction

What is this Policy?

The Supervision Policy sets out the Children Services commitment to providing quality support and supervision to all colleagues within Children Services. The policy aims to be accessible to everyone regardless of age, disability, gender, race, sexual orientation, religion/belief or any other factor that may result in unfair treatment or inequalities in health/employment

Why do we need this policy?

The Council aims to provide appropriate, responsive and flexible services for the most vulnerable residents of Torbay and can only do this if staff understand what is expected of them; have the skills, knowledge, behaviours, values and attitudes necessary to carry out their roles, are fully supported in their work and are managed effectively.

Supervision is a key factor in achieving this and the policy sets out how staff can expect to be supervised and provides managers with the key elements needed to supervise staff effectively.

“All staff working directly with children must be regularly supervised”

Lord Laming Victoria Climbié Inquiry Report 2003

II. What is Supervision?

Supervision is a participative process through which supervisors are sure that employees are performing their roles to a satisfactory standard and have the appropriate support and training to do so in line with the policies and procedures of the council. Supervision also forms a key part of individual performance management.

“A process in which one worker is given professional responsibility to work with another in order to meet certain organisational, professional and personal objectives. These objectives are competent, accountable performance, continuing professional development and personal support.”

Morrison 1993, (adapted from, Harries 1987)

There are different types of supervision. This document specifically addresses planned and structured supervision rather than unplanned supervision, which is often on-going in most effective teams, as staff members seek advice and help in situations that they deal with on an on-going basis.

This document will address:

1. Child specific supervision for colleagues who have a significant role in working directly with children, young people, and families.
2. Personal supervision for all colleagues within children services.

Child Specific Supervision

Ad hoc child specific supervisions should be recorded on Liquid Logic in a timely manner as **‘Management Oversight’** but should NOT replace a planned and structured supervision session. For example, some of these ad hoc supervisions recorded in case notes as ‘Management Oversight’ could be:

- Child focused discussion with a social worker that falls between planned supervisions.
- Supervisions that have had to be rescheduled for unavoidable reasons; the Social Worker is unavailable, or supervision does not take place within the required timescale. This will include an overview of how the risk is being managed and ensuring that arrangements are in place for the child/ren to be seen within timescales.
- Record Audit is received, and a management oversight is recorded in response giving any immediate direction within 5 working days.
- Escalation or an alert sent; management response recorded appropriately.

- Attended a strategy meeting, Team Around Family, Child Protection conference, professionals meeting or Cared for Review capturing key issues or actions
- Discussed a child at Senior Leadership Meeting or a similar senior management discussion.

N.B not an exhaustive list

Personal Supervision

The capacity of professionals to remain resilient within their role depends on effective supportive systems being in place to enhance the emotional wellbeing of the practitioner.

Personal supervision should be person centred, an opportunity for supervisee and supervisor to spend time together in a safe space to build a trusting relationship to discuss how things are going in relation to their personal wellbeing (both at work and home), personal development and role and responsibilities. The relationship should focus on good communication, openness, transparency and flexibility between supervisor and supervisee.

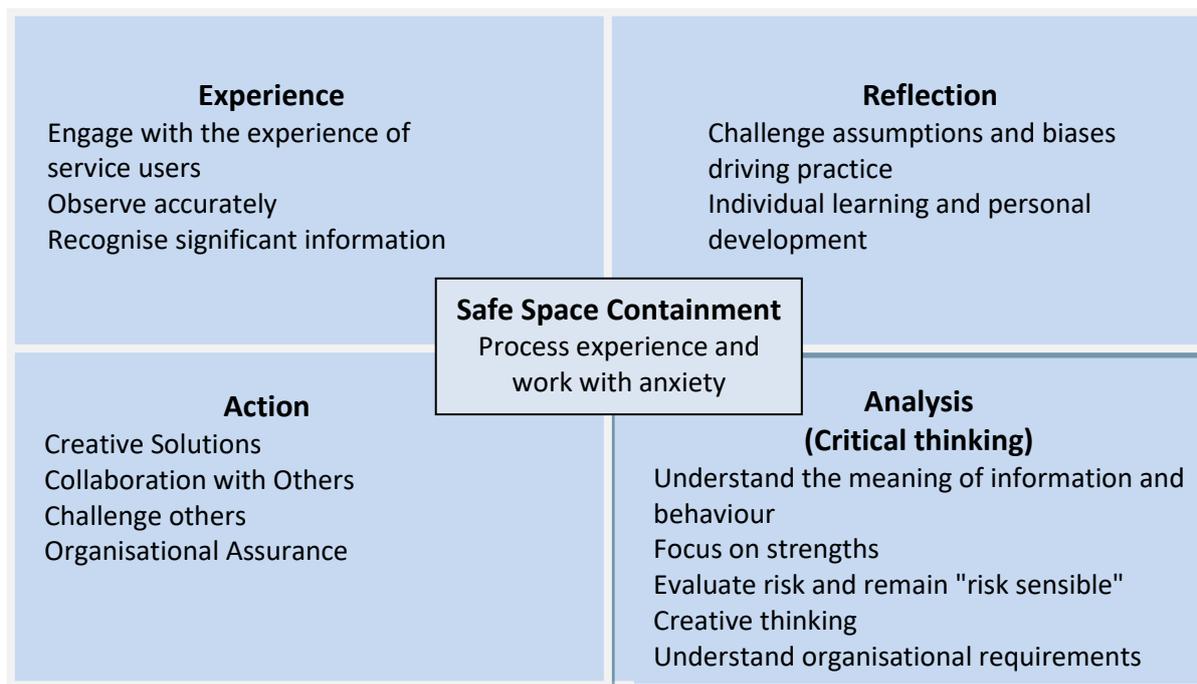
This form of supervision should provide restorative and reflective supportive opportunities to address the emotional demands on staff and support them to build resilience levels, reducing stress and burnout. The recording of personal supervision should be made using the template as outlined in appendix 4.

III. Supervision Models

There are a number of supervision models you may be familiar with or wish to explore. More information can be found on Research in Practice: the Research In Practice Reflective Supervision Resource Pack found here [Reflective supervision: Resource Pack \(2017\) \(researchinpractice.org.uk\)](https://researchinpractice.org.uk)

To support restorative and relational practice the following framework can provide a structured and reflective supervision. It is based upon the Integrated Model of Restorative Supervision (Morrison 2005; Wonnacott 2014). This model combines aspects of the 'Safeguarding Restorative Supervision' (SRS) (Wonnacott/Wallbank March 2016) and the 4x4x4 model by Morrison, T (2005).

It promotes the use of restorative skills within the supervision cycle, which if used effectively, enables an integration of case management with the staff support, critical reflection and critical thinking needed to promote good practice.



Using the Restorative approach, Wonnacott and Wallbank (March 2016) the supervision cycle as follows: -

- i. **Experience/Telling the story** – In order to understand the experience of the professional within safeguarding supervision, the supervisor needs to engage the supervisee to elicit accurate observations – this method of telling the story, reflecting on events, thinking about the voice of the service user in the story is compromised if the professional is in a difficult or overwhelmed space. Often the story becomes about the professional’s experience of the family rather than the family itself. Containment of the individual and their capacity to slow down their thinking to reflect appropriately on the family is key. This is a significant skill in restorative supervision, creating a space that feels supportive and enhances learning.
- ii. **Reflection** – Sharing feelings about the story and previous stories. In order to be thinking about making connections and recognising patterns, the professional needs to be thinking clearly. The space they are sharing with the supervisor needs to be an open and honest one where thoughts of, what is this evoking for me and what is this linked to are able to be shared without judgement. The capacity of the supervisor to listen in a non-judgmental way and know when to challenge and support connection making is again a key skill in restorative sessions. The supervisor does not remain a sponge, but instead offers a mirror experience, reflecting and identifying patterns in a way that can be heard by the supervisee.
This requires a deeper level of thinking and pattern making by both the supervisor and supervisee. To be reflective in this way, the relationship

between the supervisor and supervisee needs to be reciprocal and trusting as the supervisee may need to reveal some vulnerability. If the professional is feeling insecure or vulnerable because of workload stress etc. then this process will be slowed down. The professional is likely to be more defensive and unable to see their own contribution in these difficulties.

iii. Analysis – what does the story mean – supporting the professional to translate reflective experience into professional evidence. This requires the supervisor to be expert and facilitator at the same time; the supervisor needs to feel that the supervisee is in a place to use the knowledge gained from the reflective process to understand what life is like for the service user. Understanding what life is like, exploring different perspectives and weighing up alternative ideas are key to the supervisory process. Being in a position to analyse rather than adopt a defensive position in favour of one's own practice occurs best when both supervisor and supervisee are able to think clearly. Pattern identification, considering research evidence and own practice experience all take place within a supportive supervisory space. If the supervisee is still overwhelmed by their own experiences because they have not been contained or reciprocal in the session, they are unlikely to be able to hear the conversations on the appropriate level. In fact, they are more likely still to be focusing on their own experiences.

iv. Plans/Action – The final element of an effective safeguarding session is to agree what plans and actions need to be taken. Whilst a professional who is not in a good enough mode can agree and sign up to these, they are not likely to contribute to a shared understanding of what needs to be done and are more likely to feel that the session has been done unto them rather than being an active participant in the process.

IV. Expected Standards

1. Contract between a supervisee and supervisor

This should clearly outline the responsibilities and expectations of both parties. The contract should be discussed, agreed, and signed off at the beginning of the supervisory arrangement and reflect the minimum standards within this document. The contract should form part of the supervision records and should be reviewed annually (see Appendix 1 for sample Supervision Contract).

2. Clearly defined roles and responsibilities of supervisor and supervisee, for example:

The Supervisor is responsible for:

- Sharing the responsibility for making the supervisory relationship work however seeking alternative arrangements if needed.
- Ensuring confidentiality, subject to service user and staff safety

- Creating an effective, sensitive, supportive supervision and maintains trust.
- Adopt attentive listening skills, using appropriate service tools if available.
- Providing suitable time and location
- Agree the timescales within which supervision takes place.
- Eliminating interruptions
- Maintaining accurate and clear records in relation to comments about or actions for the supervisee as well as changes or actions in relation to cases.
- Ensuring that the supervision contract has been agreed and reviewed annually.
- Ensuring the organisation's professional standards are met.
- Ensuring that where a change in line management occurs, a handover process is arranged between all parties concerned.
- Ensuring that issues relating to diversity are addressed constructively and positively and provide opportunity for staff to raise issues about their experience and diversity.
- Ensuring the shared responsibility for case oversight and maintenance, including safeguarding, accountability, and workload.

The supervisee is responsible for:

- Sharing the responsibility for making the supervisory relationship work
- Attending regularly and on time, participating actively and bringing their agenda.
- Understanding and engaging with the rationale for supervision and being accountable for any actions.
- Preparing appropriately for supervision sessions.
- Ensuring the recording of supervision is reflective of the particular meeting.
- Ensure any identified changes or actions regarding individual caseloads are recorded on the case files
- Ensure that the contract has been agreed and reviewed annually.
- Actively participating in an effective sensitive and supportive supervision.
- Aiming to meet the organisation's professional standards

3. Agreed frequency of supervision

The **minimum** frequency of personal supervision is detailed in the table below. It is also expected that informal supervision will happen when needed. The actual frequency of supervision for individuals should be agreed between the supervisor and supervisee when negotiating the terms of the Supervision Agreement. For professional social work staff, supervision must include Reflective Practice sessions and observations of practice.

If the supervisor is absent from work for more than two weeks unplanned leave, it is the responsibility of the supervisee to report to the supervisor's line manager for alternative supervision arrangements to be made.

Part-time staff should receive supervision on a pro-rata basis.

Staff Member	Frequency	Min Duration
Early Help/ Community Care Workers	Every 3 - 6 weeks, depending on need and complexity of work	1 hour
Business Support Staff and any other non-case holding staff member.	Every 3 - 6 weeks depending on needs and level of experience	1 hour
Newly qualified social work staff on their Assessed and Supported Year in Employment (ASYE)	Weekly for the first 6 weeks of employment Then at least fortnightly for the rest of the first 6 months of employment Monthly supervision thereafter	1.5 hours
Social Workers after first year of service	Every 3 - 4 weeks, depending on need and complexity of work	1.5 hours
Senior Practitioners	Every 3 - 4 weeks, depending on needs and level of experience	1.5 hours
Practice Managers	Every 3 - 4 weeks, depending on needs and level of experience	1.5 hours
Service Managers	Every 4 weeks	1.5 hours
Heads of Service	Every 4 weeks	1 hour

In relation to child specific supervision, it is expected that each child allocated to a professional is discussed and recorded at least once within an 8-week cycle. This is to ensure managers have the necessary time and space to ensure reflective supervisions on each allocated child, direction and oversight on each of these needs to be recorded on Liquid Logic as 'Management oversight' (refer to Section II) on a regular basis (at least monthly).

4. Recording of supervision sessions

In general, the supervision record (see Appendix 2) should record details of any agreements reached, who is responsible for undertaking any action and the timescales. In the case of any disagreement concerning issues discussed in

supervision, the disagreement should be recorded. This is a record held on the social workers supervision file.

Each supervisor will keep a Supervision File of supervision records to be maintained throughout an employee's career. Supervision files should include a copy of the individual's job description, role profile, records of induction and copies of PDRs. The Supervision File must be kept in a secure place on the IT systems.

Supervision records belong to the organisation. To ensure continuity of management accountability, support and development, the records should be transferred to the next Supervisor if the supervisee is moving to another post within the organisation. The records will remain the property of the Children's Services

Access to supervision files will be restricted to the supervisor, supervisee, senior managers, and HR as appropriate, and to officers and other agencies involved in any auditing or personnel purposes.

There may be some occasions when personal information does not need to be recorded. This will normally be where such information does not have a direct impact on work performance or service delivery, and it has been agreed by all parties that it will remain confidential within the supervisory or line management relationship.

Where matters relate to a service user and their family these must be recorded separately on the child's electronic file. This should record in the case note 'managers oversight' A brief note may be made on the workers supervision record regarding the individual service user, taking into account confidentiality, to inform future sessions.

A legible, accessible, written record of every supervision session must be made. (See Appendix 2)

The supervisor is ultimately responsible for the production of adequate, accessible supervision records (even if they are written, with agreement, by the supervisee). Every effort should be made to ensure that the record is an accurate reflection of the interaction between supervisor and supervisee.

The supervision record is agreed by the supervisor and supervisee and signed (by both parties) as an accurate record of discussions and decisions made. If the supervisee does not agree with any part of the record and agreement cannot be reached on re-wording, they should be able to add their own comments or amendments which then become part of the record of that session.

In the case of a person leaving the Local Authority, records must be kept locally for at least 2 years. Records should be kept locally for longer if there is any possibility of litigation. Advice should be requested, if needed, from the Freedom of Information Officer.

Where necessary any targets or deadlines must be recorded to enable review at the subsequent supervision session.

It is appropriate for either party to record supervision as long as notes are shared and agreed as part of the individual supervisee's development.

Supervision relating to the child should include:

- Reason for involvement
- Significant events since the previous supervision
- What is the desired outcome?
- How will this be achieved
- What challenges are there to achieving the outcome
- What is the child's lived experience and what are their views?
- What actions are required (SMART).

5. Capacity and Performance

Colleagues who are working directly with children and families need to be suitably trained in supervision and safeguarding to be able to provide this effectively. In addition, they should also be provided with supervision relevant to their role.

Managers will ensure the supervisees are supported through an annual 'Performance Management Review' appraisal as per the staff appraisal process.

Where staff members are not meeting the requirements of their post, the manager shall address that within supervision to ensure appropriate support, if necessary, the Capability process should be utilised.

See HR policies and procedures

6. Group supervision

Group Supervision is a forum for that enables reflective thinking, problem solving, peer group learning and giving and receiving strong feedback within a supportive setting. When a group supervision process is undertaken the roles and responsibilities of the supervisor and supervisees should be the same with the added principles:

- Every team and service are expected to facilitate at least one Group Supervision a month
- The group should clarify and agree the boundaries of confidentiality
- The records should reflect that this was a group supervision

V. Quality Assurance

There is a critical link between good quality regular supervision and good outcomes for children, young people, and families. Recording should be available during inspection and audits if required.

To be effective, the supervision process requires monitoring and quality assurance arrangements. The quality assurance process ensures that the Councils expected standards of supervision as outlined in this policy are being followed:

- Colleagues are being supervised professionally and effectively
- Supervision sessions are recorded
- Individual Supervision Agreements are used and reviewed
- The supervision process promotes anti-discriminatory practice

The quality assurance arrangements include the auditing of a random selection of supervision files on a 3 monthly basis by a Service Manager on behalf of the Divisional Director. The findings along with data from the activities described below will be reported as part of the department's performance reporting and quality assurance schedules

It is essential that good quality supervision is provided. A practitioner who is not receiving supervision at the required frequency or standard should:

- In the first instance arrange a one to one with their supervisor to discuss and resolve, where possible.
- If they are unable to find a solution, the supervisee should request a three-way meeting between themselves, their supervisor and appropriate line managers (potentially including theirs and the supervisors). The difficulties should be discussed, and outcomes agreed.

VI. Appendices

The following documents should be used as tools to ensure effective supervision.

Appendix 1 - Supervision Contract Discussion & Agreement

To be completed at the start of a new job (at every change of supervisor) and reviewed annually.

Appendix 2 – Guidance to record of Supervision

To be completed at every one-to-one supervision session (Annual Reviews Forms- to be completed at the annual or 6-monthly review or at the induction of a new employee)

Appendix 3 – Group Supervision

Appendix 4- Personal Supervision Template

Appendix 5- Guidance on how to undertake Reflective Supervisions

Appendix 1 - Supervision Contract Discussion & Agreement

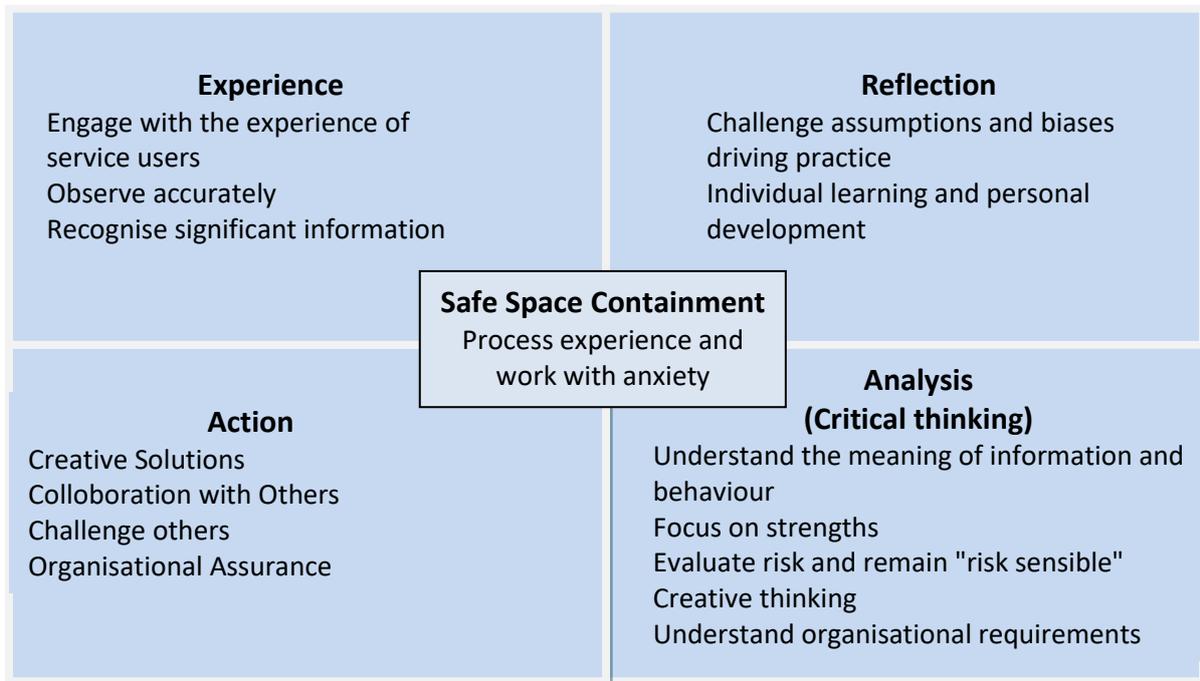
Name of Supervisee:

Name of Line Manager:

Name of Team/Service:

Purpose of supervision

This framework to structure reflective supervision is based upon the Integrated Model of Restorative Supervision (Morrison 2005; Wonnacott 2014). This model combines aspects of the 'Safeguarding Restorative Supervision' (SRS) (Wonnacott/Wallbank March 2016) and the 4x4x4 model by Morrison, T (2005). It promotes the use of restorative skills within the supervision cycle, which if used effectively, enables an integration of case management with the staff support, critical reflection and critical thinking needed to promote good practice.



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This requires a deeper level of thinking and pattern making by both the supervisor and supervisee. To be reflective in this way, the relationship between the supervisor and supervisee needs to be reciprocal and trusting as the supervisee may need to reveal some vulnerability. If the professional is feeling insecure or vulnerable because of workload stress etc. then this process will be slowed down. The professional is likely to be more defensive and unable to see their own contribution in these difficulties.

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hear the conversations on the appropriate level. In fact, they are more likely still to be focusing on their own experiences.

- iv. Plans/Action** – The final element of an effective safeguarding session is to agree what plans and actions need to be taken. Whilst a professional who is not in a good enough mode can agree and sign up to these, they are not likely to contribute to a shared understanding of what needs to be done and are more likely to feel that the session has been done unto them rather than being an active participant in the process.

Responsibilities and expectations

The supervisor and supervisee will:

- Meet a minimum of every four weeks and be scheduled to last at least an hour. These will commence on & will be located in a confidential space which is appropriate and free from distraction
- Undertake open and honest discussions in relation to cases loads
- Pose and respond to challenging questions with regard to action, progress and outcomes for children, young people and families.
- Focus discussions on any current identified families where there are needs, concerns or risk for children, young people and families
- Identify good practice which can be transferred or built upon when supporting other cases
- Work in an environment of high support and high challenge.
- Discuss teamwork & training as appropriate
- Ensure that supervision records include any actions required.
- Implement any agreed actions.
- Ensure all records are updated as required.

Quality Assurance

Recordings should be available during inspection and audits if required. In the event that there is unresolved dispute between supervisor and supervisee, both parties will agree to meet together with _____ to ensure that any difficulties are satisfactorily resolved. Both parties will ensure that the other is aware in advance that a dispute resolution meeting has been arranged.

Agreement

Supervisee signed: date:

Supervisor signed: date:

Appendix 2:
GUIDANCE TO RECORD SUPERVISION

(Please refer to Supervision Policy and One Min Guide for prompt questions)

I. What is Happening/What Happened (Experience)

- ▷ Update on Previous Actions (if relevant)

- ▷ Case Update since allocation/last supervision

- ▷ Experience of the child/children

II. Summary of Reflections and Analysis

III. Plans and Actions

What Needs to be done?	Who is responsible?	By when?

Appendix 3 Group Supervision Template

Torbay Restorative Group Supervision Circles

Restorative Group Supervision is an adaptation of the Problem-Solving approach within Restorative Practice. This is a short and powerful tool that makes the most of the 'collective brain' of a group & takes no more than a half hour. This process is based on one individual sharing an issue or a problem that is either related to a child they are working with, or an organisational problem/issue and the creativity of colleagues/peers seeking to understand and then offer possible solutions in a non-judgemental way in a supportive circle. The objective of the process can be to (a) Offer reflective space to aide clarity and thought (b) Affirm the current approach and actions of the practitioner (c) Offer alternative options or solutions to consider

A Six Stage Process

Roles: Facilitator, Time Keeper and participants (inner-outer circles)

1. Stage 1 - The Presenting Situation (use genogram where relevant)

The presenting situation (can be an issue or problem) is to be clearly outlined by the person without any interruption from the group. Tell the group how you are **feeling** about it **Allow 2-5 minutes**.

2. Clarification Questions

This is the only stage where there is dialogue allowed between the group and the person presenting the problem or issue. The group are allowed to ask clarification questions on the subject, typically, *“when does this...?”*, *“how often will they...?”*, *“who is involved?”* etc. It is imperative that during this stage **NO SOLUTIONS** are offered; only **clarification questions** asked. The inner circle ask questions, the outer circle are silent and the empty seat is occupied, in turn, by a member of the outer circle, as required.

Allow 2 minutes.

3. Stage 3 – Silence (1 min)

Take a moment to think and contemplate before proceeding to ask clarifying questions

4. Stage 4 – Hypothesizing and Mentalising (5-8 mins)

- Hypothesising – Generation of multiple and different ideas to help further understanding of the case/the dilemma, tentative, rather than seeking ‘one truth’
- Mentalising – Putting yourself in someone else’s shoes, actively using your imagination to think about someone else’s mental states (e.g. needs, desires, feelings, beliefs, goals, purposes and reasons)
- Role Plays: Consider asking group to speak from each perspective (child, carer, foster carer, keyworker, birth parent).

5. Stage 5- Solutions

The person with the issue sits with paper and a pen to **list the solutions/ways forward** offered by their colleagues/peers. They must take care not to respond to any of the suggestions, even if they have been tried before, they must just **listen** and **note** the suggestions, trying to maintain **positive body language and an open-mind**.

The outer circle is silent and can only offer solutions by sitting in the empty seat within the inner circle. Once they have offered their solution they return to the outer circle so that other outer circle people can use the inner circle seat. **Allow 2 minutes.**

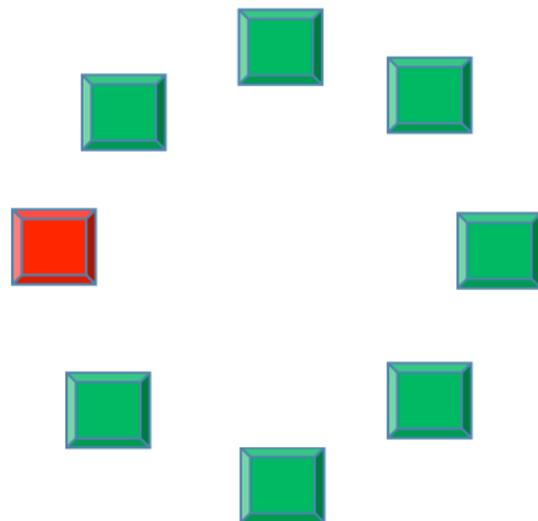
6. Stage 6 – Selection

The person with the issue sits, reflects and **selects the 2 suggestions** that they will **action** and **use** in the future. They then **share** these with the group so that the group can check in with them at a future date to ensure they have been **actioned**. **Allow 1 minute.**

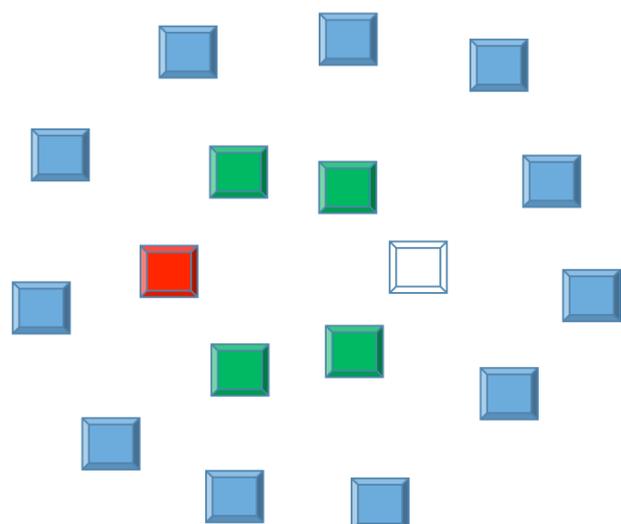
Suggested seating plans

The chairs should be arranged in a single circle or two concentric circles with an empty seat. The red seat indicates the person sharing the problem. The green seats indicate the equal discussion partners in the INNER CIRCLE. The blue seats indicate the optional discussion partners in the OUTER CIRCLE.

Smaller Groups: single circle



Large Group: double circle



Recording a Group Supervision

It is important to ensure utmost care in what is recorded on a child's case file. Group Supervision is a tool to facilitate reflective thinking and practitioners must only record a summary of the collective understanding and solutions. The notes of the meeting must be approved by the Team Manager before they are uploaded on to Liquid Logic.

Below is a helpful format that has been devised by a Team Manager in Torbay and is currently in use.

Child:	Social Worker:
Date:	CIN <input type="checkbox"/> CP <input type="checkbox"/> Cared for Child <input type="checkbox"/>
Present:	
Dilemma:	
Update: What's happening?	
Suggested Solutions: •	
Solutions to test: (Max of three) •	Timescale for review (SMART): • •

Some Helpful Group Supervision Resources

Sometimes it can be helpful to use different models of reflective supervision based on the particular issue or problem that is at hand. Attached below is a list of alternative models that could be used or incorporated into the existing Problem-Solving Circle Format

Reflecting Teams: The facilitator and the individual with the dilemma have a reflective conversation in front the rest of the team (3+ people is best) for 8-10 mins. Then the rest of the team have a conversation (8-10 mins) with each other to share their reflections on what has been discussed. The facilitator and individual then feedback on what it was like to hear a discussion about themselves, what ideas and thoughts resonated and which did not.

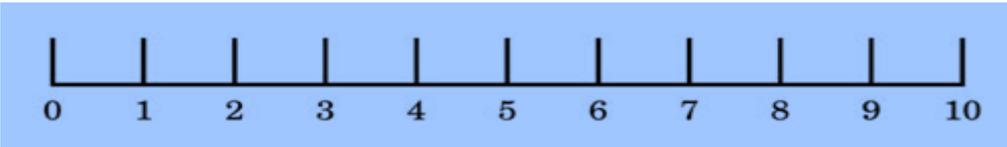
This model is not about finding solutions or actions. This is a reflective discussion and requires a lot of trust in the room as it involves everyone taking relational risks which each other. The detail of the discussion is not to be recorded on the child's file, but a thoughtful summary and actions could be recorded (TM approval required)

Role Plays: Self-explanatory but if someone was struggling with a difficult conversation coming you could arrange the room and take on the role of the parent and the SW with the dilemma would start the conversation. However, others could jump in and take over the line of questioning. The detail of the discussion is not to be recorded on the child's file, but a thoughtful summary and actions could be recorded (TM approval required)

Systemic Model: This is very similar to the Restorative Problem-Solving Circle. The presenter either brings a genogram or someone draws one in the room as the presenter discusses the family (7 mins). The presenter then gives a dilemma. Then clarifying questions (7mins). Presenter shares what impact the family are having on them. Hypothesising (7 mins) – can include mentalising. Presenter then selects 1 or 2 hypothesis which resonate with them and 1 or 2 which challenge them. The team then offer solutions for how the presenter can test the hypothesis they have selected. The detail of the discussion is not to be recorded on the child's file but record the presentation, the dilemma, the hypothesis chosen to be tested and the solutions could be recorded (TM approval required)

Safe Uncertainty: Using Barry Mason's Model of Safe Uncertainty the facilitator needs to get the presenter to discuss the case using genogram and then invite everyone to plot where they would put the child on the Safe/Uncertain axis. Then discuss the rationale for their choice and what it would take to move them to a position of safe uncertainty. Also, at the end of each discussion invite the group to scale the family 0-10 and keep a record of that so it can be reviewed later. The detail of the discussion is not to be recorded on the child's file, but a thoughtful summary and actions could be recorded (TM approval required)

Appendix 4- Personal Supervision Template

Personal Supervision pro-forma	
Staff Member Name:	
Line manager Name:	
Today's date:	
Have the previous supervision notes been agreed and seen by the supervisee prior to today's supervision? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Review actions & progress from previous supervision:	
What would you like to discuss within supervision today? <ul style="list-style-type: none"> • • • 	
PART A - Health and Wellbeing (How are you doing?)	
You the person:	
You in your role:	
Out of 10, how does work feel right now? (10 being high stress and 0 low level and relaxed state) <div style="display: flex; align-items: center; margin-top: 10px;">  <div style="margin-left: 20px; border: 1px solid black; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;"> □ </div> </div>	
<i>Have you considered completing the stress indicator tool?</i> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required <input type="checkbox"/>	
Reflective discussion of the above to include current work streams / stresses / sources of support / wellbeing services and how these concerns will be addressed.	
PART B - Reflective Practice – thinking about relationships / practice	
What has gone well since the last supervision? (compliments / good practice / achievements) <ul style="list-style-type: none"> • • • 	

Anything you want to discuss that's not gone so well? (Capture any actions in the plan below)
Reflective discussion around your role / recent issue / concern and how you dealt with this? What were your reflections around how you could do this differently? Any support needed?
PART C - Learning & Development (CPD, training needs, career progression)
What have been the main learning points in this last period? (Reflect on Part A & B)
Any further areas of development / training in relation to your role you want to progress, or any additional support required?
Annual leave / Flexi discussions

ACTION PLAN – Please ensure these are SMART and capture your discussions		
What needs to Happen	By Whom	By When

Date of next supervision meeting:	
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Appendix 5 – Supervision Prompt Questions Template

A GUIDE TO REFLECTIVE SUPERVISION (INTEGRATED MODEL)

**Stage 1: What happened/what is happening
(EXPERIENCE)**

- Update on previous actions
- Engage worker to recall what happened/is happening since allocation/last supervision
- Provide safe space to contain worker's emotions and anxieties

These questions aim to support accurate and detailed recall of events. A partial description of the situation will cause problems later in the cycle. But the right questions can help workers to recall more detail, more accurately. In these lists 'you' refers to the supervisee

- | | |
|--|--|
| Q – What was your aim? What planning did you do? | Q – What were the key moments? |
| Q – What happened before the incident / event / meeting / interview / visit? | Q – What did you notice about yourself, the user, your co-worker? |
| Q – What was your role? | Q – What words, non-verbal signals, interactions, sounds, images or smells struck you? |
| Q – What did you expect to happen? | Q – What do you think the service user would have noticed about you? |
| Q – What happened? | Q – What or who was hard to observe? |
| Q – Identify different perceptions of co-workers. | Q – What observations or concerns do other agencies have? |
| Q – What did you say and do? | Q – What went according to plan? |
| Q – What methods or interventions did you try? | Q – What didn't happen? |
| Q – What did the user say, do or show? | Q – What changes to your plan or choices did you make? |
| Q – What reactions did you notice to what you said / did? | Q – What did you say, notice or do immediately after the incident / event / interview / visit? |
| Q – What surprised or puzzled you? | |
| Q – Who behaved differently? | |
| Q – What stuck out for you? | |

**Stage 2: What are your feelings and reflections
(REFLECTION)**

These questions aim to draw out feelings, partly because they may bring out further information or may reveal the worker's underlying attitudes. They may also give clues about other personal factors complicating the worker's responses. Reflection also helps the worker make links between the current situation and their prior experiences, skills or knowledge.

- | | |
|--|--|
| Q - What did you feel at the start of the incident / event / meeting / interview / visit? | you, the user or the co-worker felt or reacted, for example, in relation to gender or race? |
| Q - What feelings did you bring to the incident / event / meeting / interview / visit? | Q - Where and when did you feel most or least comfortable? |
| Q - Describe the range of feelings you had during the incident / event / meeting / interview / visit. | Q - Who seemed least or most comfortable? At what points? |
| Q - What did these feelings remind you of? | Q - Who found it hardest to express their feelings? |
| Q - What patterns did you see in this incident / event / meeting / interview / visit? Are these familiar? | Q - What thoughts / ideas went through your mind during the incident / event / meeting / interview / visit? |
| Q - Where have you encountered similar processes? | Q - What are the similarities / differences between this incident / event / meeting / interview / visit and your previous contact with the service user? |
| Q - Describe a time when you last experienced this process. What happened? | Q - What did you tell yourself about what was happening, or about your feelings? |
| Q - Who / what does this user remind you of? | Q - What metaphor or analogy would describe your experience of working with this situation? |
| Q - What did you think the user was feeling? Based on what? Q - What feeling might you or your co-worker be carrying on behalf of the user / victim / other workers? | Q - What was left unfinished? |
| Q - What projections / introjections of feelings or emotions might be occurring? | |
| Q - What other factors might influence how | |

Stage 3: Why are things the way they are? What does it mean? (ANALYSIS)

- Exploring different perspectives and weighing up alternative ideas
- Pattern identification, research evidence and own practice experience

These questions help with analysis by probing the meanings given to situations by the supervisee and user, prompting consideration of other explanations.

They may help you identify what is not known, what is not understood and lead to areas for further assessment.

Q – List three assumptions you, the co-worker or the user, brought into the incident / event / meeting / interview / visit.

Q – How do you define your role in this situation?

Q – How do other agencies / colleagues define your role in this situation?

Q – How do the user and their family define your role?

Q – What aims / outcomes for this intervention were or were not achieved?

Q – What went well, or not well, and why?

Q – What behaviours or norms in this situation are acceptable to the family or community?

Q – What norms / standards do other agencies expect in this situation, and why?

Q – What do you understand this agency's standards / norms to be in this situation?

Q – What other, possibly unexpected outcomes, did the incident / event / meeting / interview / visit produce?

Q – How would the user explain what was happening in that incident / event / meeting / interview / visit?

Q – How else could you explain what happened?

Q – How would you describe the power dynamic during this incident / event / meeting / interview / visit?

Q – Did power shift during the intervention? If so, why? What might this tell you about assumptions around gender, race, sexuality, and so on?

Q – How far did this session confirm or challenge your previous understanding or hypothesis about this situation?

Q – How else might you have managed the incident / event / meeting / interview / visit?

Q – What are the current strengths, needs, and risks, for the different users?

Q – What is not known?

Q – What areas of further assessment are required?

Stage 4: What Next? (Action)

- They are agreed between the supervisor and the supervisee, clearly noting what will be done, by whom, and by when

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.

Q – In the 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?

Q – What are you responsible for in managing this situation?

Q – What training, supervisory, co-work and support needs have been raised for you?

Q – What information needs to be obtained before proceeding?

Q – What are your aims in this next phase of work?

Q – What is urgent and essential?

Q – What would be desirable?

Q – What is negotiable and what is non-negotiable in this situation?

Q – What would be a successful outcome of the next incident / event / meeting / interview / visit from your perspective?

Q – What would be a successful outcome of the next incident / event / meeting / interview / visit from the user's perspective?

Q – What are the different ways in which you could approach this?

Q – What might be your strategy for the next intervention?

Q – What are the possible best or worst responses from the user?

Q – How can the user be engaged? What does she / he need from you?

Q – What contingency plan do you need? What is the bottom line?

Q – Who else needs to be involved (co-worker, supervisor, other agency)?

Q – What would you like from them?

Q – On a scale of 0 – 10, where 10 is total confidence, how confident are you with your role in this situation?

Q – How can you prepare for this? Mental rehearsal, planning, reading?

Q – What can I do that would be helpful at this stage?

Q – What and when does feedback and debriefing need to take place?

Q – Are there any safety issues for you or others?

Q – What can be done to minimise any dangers?

* Adapted from the Integrated Model of Restorative Supervision (Morrison 2005; Wonnacott 2014) and the PDSP Supervisor Guide (RIP)