Supervision Policy

and

Practice Guidance

Document information

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Executive Summary

The aim of this policy is to provide a framework for the professional supervision of all staff working in Kent County Council Adult Social Care and Health Directorate.

It seeks to ensure that it meets the needs of the service, staff and their supervisors regardless of the area in which they work.

The supervision policy and practice guidance document sets out:

- The policy requirements
- The guiding principles and core values
- Methods and frequency of supervision
- Supervision agreements and record keeping
- Requirements for specific groups of staff
- Principles for running group supervision sessions
- Ways to support staff learning and development
- An understanding of a coaching approach and coaching questions

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Key messages

1. All staff are entitled to regular, person-centred, quality supervision.
2. All staff should have a supervision agreement with enough detail to provide a contract between supervisor and supervisee.
3. Records are an essential part of supervision and may be used for an audit of supervision practice, evidence in disciplinary cases, serious case reviews or any legal proceedings.

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1. POLICY

1.1 Principles

Kent County Council Adult Social Care and Health Directorate expects that every member of the adult social care work force receives good quality effective supervision on a regular basis.

It recognises that delivery of adult social care services is complex and demanding and that staff are the key asset in delivering high quality services that make a real difference to service users' lives. Supervision is critical to the way in which this can be achieved.

This policy sets out how staff can expect to be supervised and provides managers with the key elements needed to supervise staff in all relevant settings effectively.

1.2 Scope

This policy applies to:

- All staff employed by Kent County Council Adult Social Care and Health whether on a temporary, permanent, full time or part time basis. This includes agency and relief staff as well as students on placement within the Directorate.
- Supervisors employed by other agencies or directorates within Kent County Council with responsibility for the supervision of Adult Social Care staff.

1.3 Context and National Guidance

This policy and guidance document is based on:

- "The Standards for Employers of Social Workers in England"

https://www.local.gov.uk/our-support/workforce-and-hr-support/social-workers/socialworker-standards/standards-employers (accessed 03/04/2019)

- Recommendations of the Social Care Institute for Excellence: Effective Supervision in a variety of settings. SCIE Guide 50. May 2013. Updated January 2017. (www.scie.org.uk)

- Working Together to Safeguard Children. July 2018. (www.workingtogetheronline.co.uk)

Important

All staff whatever their role should receive supervision. Any permanent deviation from the recommended frequency detailed in this policy, should be by agreement between the two parties in the first instance. The reasons for the decision should be clearly recorded in the Individual Supervision Agreement and agreed and signed by the team manager or Head of Service as well as the supervisor and supervisee.

1.4 Definition of supervision and links to HR policy

1.4.1 Tony Morrison, a leading figure in the field of social care, particularly respected for his work in Supervision, illustrates supervision to be: "a cooperative and facilitating process, which aims to:

- Develop the worker's effectiveness
- Provide a suitable and appropriate forum for the worker to assure those to whom he or she is accountable that he or she is acting responsibly
- Develop the worker as a professional person."

1.4.2 Links to KCC HR Policy: "Managing and Supporting Performance" (2018) Individual performance management within Kent County Council is managed through individual conversations which focus on:

Objectives: Employees have work-based and development objectives which are agreed, regularly reviewed and updated/added to as appropriate.

Performance: Managers will describe to each team member what the different

levels of total contribution look like for their role and define what they need to do to be awarded a higher assessment rating. Managers will give their staff regular constructive feedback about their performance. Line manager and employee jointly reflect on performance: What went well? What could have been better? What could be done differently?

Development: There are many ways that development needs can be met. Managers should support staff to identify and use the most suitable way of developing themselves, bearing in mind any impact on service delivery.

For further information on "Managing well through conversation", go the KNet: http://knet/ourcouncil/Managing-performance/Pages/All-about-Managing-and-supportingperformance.aspx

General Principles of Supervision for all Staff

1.5.1 There are three interrelated aspects to supervision:

- Line management is about accountability for practice and quality of service, including the specific responsibility of and accountability for management decisions on cases held by their supervisees or other work accountabilities.
- This also includes duty of care, supporting the wellbeing of the team and of the individuals within the team, managing team resources, delegation and workload management, performance appraisal, and other people management processes.
- Professional supervision is when workers or groups of workers discuss and reflect on the work they are doing with the people and families they support. The purpose of professional supervision is to enable and support high quality strengths-based practice. A key aspect of this function is reviewing and reflecting on practice issues, for example: roles and relationships, strengths and assets people may have, evaluating the outcomes of the work and maximising opportunities for wider learning.
- Continuing professional development of supervisees to ensure they have the relevant skills, knowledge, understanding and attributes to do the job and progress their careers. Constructive, appreciative feedback and observation of practice should be part of the learning process for workers and supervisors.

1.5.2 Within the three main aspects of supervision sit **four critical functions** of the process. These functions are interdependent, that is one function cannot be effectively performed without the others. An over-emphasis on, for example, management, will leave the supervisee feeling that they are being overly controlled and that the only purpose of supervision is to "check up on them".

An over-emphasis on support could result in important discussions about workload, decision-making, and accountability being neglected.

Each function is described in detail below.

1. Management

This function is to ensure that the work for which the supervisee may be held accountable is carried out to a satisfactory standard.

Discussion during supervision may include any of the following, when appropriate and relevant:

- An acknowledgement by the supervisor for the overall accountability and responsibility for decisions made on work held by supervisees.
- The overall quality of the supervisee's performance and work output/outcomes.
- The policies and procedures relating to their work and that these are understood and followed.
- Quality check of electronic recording by worker
  Managers to discuss safeguarding work and check that service users are safe and the principles of making safeguarding personal are applied.
- Ensure that the Safeguarding Adults Capability Framework is completed with staff as appropriate.
- Observation and feedback of practice.
- The role and responsibilities of the supervisee are clearly understood, including the boundaries and limits of their role.
- The development and monitoring of action plans/targets and objectives.
- The monitoring of the supervisee's workload.
- The monitoring of the supervisee's individual performance targets.
- Health and Safety including Stress Management.
- Strengths-based performance management
- Discussions and agreement on resources allocation and expenditure, including that provided through or in partnership with other agencies e.g. Equipment & adaptations, Telecare, continuing health care.
- Annual leave/ flexible working.

For those supervising students please ensure that when the student:

- Introduces themselves to the person, they make it clear that they are a student and they also provide your contact details.
- Sends any correspondence to the person, they ensure their title of 'student' is clearly visible.

2. Learning and Development

This function is to encourage and assist staff in reflecting on their own performance, identify their own learning and development needs and to develop plans or identify opportunities to address those needs.

The learning and development function will be achieved through:

- Helping supervisees identify their preferred learning style and opportunities for learning
- Assessing development needs and identifying learning opportunities

- Giving and receiving constructive feedback on performance
- Providing opportunities for live feedback and shadowing
- Enabling the supervisee to reflect on learning opportunities undertaken and applying that learning to the workplace
- Supporting staff to develop critical thinking, aiming to enable practitioners to re-think their assumptions about practice and try to do things differently.
- Exploring the use of coaching/ mentoring

3. Support

This function recognises that, from time to time, supervisees may require both practical and emotional support to carry out their role; this may be because of particular situations, change management, flexible working, specific incidents or personal issues that may temporarily impact on their work performance.

By offering support within the supervision context supervisees should be given the opportunity to reflect on the impact of the work upon them and prevent issues adversely affecting them and their work.

Personal factors affecting performance should be acknowledged without the supervisor drifting into a counselling role. Where there are such issues, the supervisor should take them seriously and offer other help (e.g. the Staff Support Line). The supervisor should explore with the supervisee how their work performance is impacted by the personal issues they are facing and how their performance can be maintained or improved, including any reasonable adjustments to their workload and how any support such as counselling can help improve their work performance.
This will be achieved through:

- Creating a safe environment within supervision where trust and confidentiality are maintained
- Enabling and empowering expression of feelings in relation to the work role
- Clarifying the boundaries between support and counselling
- Exploring the use of coaching/ mentoring
- Completing stress/work risk assessments for the team or individual as appropriate
- Monitoring the health of the supervisee and referring to occupational health or counselling when appropriate
- Supervisors having a good understanding of "reasonable adjustments" and

feeling <u>disability confident</u> (the scheme which replaces the Two Ticks – 'Positive About Disabled People' ").

- Display Screen Equipment assessment (DSE) for all supervisees including mobile and flexible workers

Responding to serious incidents

Supervisors need to be mindful of how their supervisee's case work may impact on their health and wellbeing. When there is a serious incident, such as the death of an adult of someone the supervisee is working with. The supervisee is likely to require additional support at this time. Consideration must also be given to whether or not the individual's supervisor is also in need of additional support at that time. On hearing of a serious incident, involving a person on a practitioner's workload, the team manager (or in their absence, the most senior member of the team in work) should undertake to make contact immediately with the worker to inform them of the incident and to arrange to meet with them as soon as possible on that day.

Trauma Informed supervision

It is not just serious incidents that will have an impact on a practitioner's health and wellbeing. Working with people who are experiencing or have experienced significant trauma in their lives can feel overwhelming and distressing for the practitioner. Supervisors need to be 'trauma informed' in their supervision practice in order to be able to support practitioners in their casework to reduce stress, burnout, and secondary trauma.
Trauma-informed practice embodies the following principles: safety, choice, collaboration, trustworthiness, and empowerment. These should be infused in the supervision processes.

Safety: the importance of having a safe, consistent, regular & reflective space. When people have experienced trauma, adversity & toxic stress, they often function in a survival mode, which can restrict their thinking. The safer one feels in supervision, the more able will be to think, reflect, and explore.

"Trauma-informed supervision actively works to increase feelings of multi-layered safety, regulation and trust and decrease feelings of danger, dysregulation and threat." (Dr K, Triesman, 2022, page 73).

Working with traumatised people can cause secondary or vicarious trauma. We all have our own triggers, and stressors that can be re-enacted within the work; therefore, prioritise reflection, wellbeing & self-care.
  • What supports the supervisee to feel safe/ listened to/ supported?

- What does safety look like/ feel like to the supervisee?

Collaboration & Peer support: there is recognition that healing happens in relationships by sharing power and decision-making. Peer support is a flexible

approach to building mutual, healing relationships amongst equals based on core values.

Trustworthy: we are all unique individuals who bring into the work our own experiences, life histories, and biases. This is a space where we can own our own mistakes. Supervision has a therapeutic function, but it is not personal therapy; therefore, respectful, and professional boundaries are maintained.

Empowerment & Choice: supervision should magnify and celebrate strengths, "wins", contributions and positive qualities within the supervisee, the supervision relationship, and the organisation. The supervisee is an active participant in the supervisory process.

"Supervision should model the model…We need to contain the container, and care for the carer. We need to lead by example and let our words mirror our actions, and our actions mirror our words (Dr K Triesman, 2022, page 71).

4. Negotiation

This function is to ensure that the relationships between the supervisee, their team, the organisation and other agencies with whom they work are effective.

This will be achieved through:

- Briefing senior managers about key issues through the agreed alerts procedures
- Dealing sensitively but clearly with concerns and complaints about colleagues and others with whom they work
- Consulting and briefing staff on changes and developments that affect their area of work
- Advocating between worker or team and other parts of the agency or with outside agencies

5. Anti-discriminatory practice in supervision

Supervisors need to be mindful of the power differentials within the supervision/supervisee relationship. Although supervision should, as much as possible, be a collaborative process based on mutual trust and respect, a power imbalance is inevitably built in given the purpose of supervision, in part, is to manage performance and ensure quality of practice. There needs to be an honest and open dialogue between the supervisor and supervisee when constructing and

reviewing supervision agreements which helps create a safe environment for difficult conversations and sets out how any disagreements are resolved.
The above is especially important as the ASC workforce is diverse and is represented by people from many different cultural and ethnic backgrounds and other protected characteristics (e.g. disability, neurodiversity, sexuality, gender

identity); it is also important to recognise that people may have more than one protected characteristic. Supervisors and supervisees need to feel safe to engage in conversations about difference and learn from one another. This requires a reflective and reflexive approach by both parties to be able to accept challenge without retreating into defensive positions. Understanding of concepts such as unconscious bias, cultural competence and intersectionality are vital to enable an honest dialogue in supervision, and for supervisors to attain the skills necessary to support supervisees who have protected characteristics, as well as to ensure anti-discriminatory practice with the people they support.
Useful resources:

1. Creating and Sustaining Anti-Oppressive Relationships in Social Work using the MANDELA Model
https://www.youtube.com/watch?v=8-EgsdOByr8

2. Support to implement post-qualifying standards for practice supervisors in adult social care - Identity, power, values and ethics
https://adultsdp.researchinpractice.org.uk/tools-1-6/

3. Critical conversations in social work supervision
https://practice-supervisors.rip.org.uk/wp-content/uploads/2020/12/PT_Critical-conversations-in-social-work-supervision_Final.pdf

4. The Six Cs model
https://sway.office.com/47M0gP65ZrUmjhVp?ref=Link

5. Why intersectionality matters for social work practice in adult services
https://socialworkwithadults.blog.gov.uk/2020/01/31/why-intersectionality-matters-for-social-work-practice-in-adult-services/

1.6 Supervision methods

The Adult Social Care and Health directorate remains strongly committed to ensuring that all staff will continue to have access to one-to-one supervision; however, it is recognised that supervision is much more than one-to-one sessions: it is an on-going process that takes place in many different settings and in many different ways.

The three main methods of supervision aside from formal one-to-one sessions are

outlined below. For all staff, group and ad hoc supervision have a place, but cannot and should not replace planned, formal, recorded, one-to-one sessions.

1. Group supervision

Group supervision should be viewed as complementary to formal one-to-one supervision. It involves a group of staff all involved in the same or similar tasks, meeting with a supervisor to discuss issues about their work or the way they work together as a team. This may be done in the context of a regular team meeting or as a separate session to look at specific issues. Group supervision aims to create a safe space for workers to be able to talk openly about a situation they face and allows the group and the presenter to reflect on what is happening with the situation and to share ideas that might help resolve the situation for that worker.

Group supervision should be considered for staff from all levels of experience as an additional method of delivering professional development and learning. Group supervision should be used flexibly and creatively both within and across district teams and services.

More experienced practitioners, senior practitioners and managers should take responsibility for agreeing the organisation and delivery of group supervision within their service area according to the needs of their staff and of the people with whom they work.
(See section 2.2)

As with other forms of supervision, all discussions that are in response to the need for social work/ practitioner intervention with or on behalf of the adults they are working with must be formally recorded in the person's case notes. The recording of these discussions and any decisions made are the responsibility of the team manager / lead who should ensure that the relevant information is recorded.

Group supervision can be a used to provide supervision particularly in provider unit settings. However, individual supervision should be provided if requested by the manager or employee, or if there are any competency or performance issues. This could be time limited.

Important

For registered practitioners (Social Workers / Occupational Therapists) group supervision

should not replace individual supervision but can be used to complement it.

2. Unplanned or "ad-hoc" case work discussion and decision making

The pace of work and the infrequency of supervision means that staff often have to "check something out" with a supervisor, obtain a decision or gain permission to do something in between formal supervision sessions. Staff who work closely with their supervisor will be communicating daily about work issues, problems arising, and changes in policies or procedures.

This form of supervision is, of course, a normal and acceptable part of the staff/supervisor relationship. There are, however five points to be borne in mind when considering unplanned or ad-hoc supervision:

1. Key points of any work-based discussions should be recorded so as to provide evidence of: a) the thinking underpinning any current or future decision-making processes; b) to provide a list of agreed actions to be followed up; this record may either be maintained in supervision notes, or where decision specific to a person, will be in the electronic records.

2. Any decisions made with regard to an adult should be clearly recorded on the adult's file. Information relating to more than one adult in a family should be copied on to the records of each person so that each adult has a contemporary record of any decisions made which affect the whole family.

3. Any decisions made with regard to the person we support should be clearly recorded in their electronic records. Information relating to more than one person in a family should be copied into that person's electronic records so that there is a contemporary record of any decisions made which affect the whole family.

4. Any safeguarding issues relating to children must be recorded and the appropriate social worker in Children's Services informed.

5. Where supervisees and supervisors work closely together, this does **not** negate the need for one-to-one time together on a regular basis. However, it is likely that the main focus of these sessions will be on the individual, their development, performance and any issues arising from their work that do not arise on a day-to-day basis.

3. Observation of practice or quality of work, with feedback provided.

The observation of practice is an important element of supporting the practitioner to learn and develop.
It is expected that practice will be observed as a minimum of once every 12 months; this observation could take the form of an observed activity closely

followed by a reflective session to capture key learning points (see 2.1). In some sections of Adult Social Care, particularly in provider settings, observational supervision will take place on a daily basis. An observation of practice should be undertaken with intentionality and with feedback to support learning in these settings.

1.7 Frequency of supervision

- It is good practice for the supervision of **all staff** to take place on a regular basis, every 4 to 6 weeks.
  The frequency of supervision should reflect:
- the supervisee's level of experience and competence
- any particular circumstances that apply to the supervisee which means they may require more frequent supervision (e.g. a difficult piece of work, the level of risk associated with work, personal difficulties or relationships, performance issues or levels of stress).
- Supervision for part time staff should be the same but needs to be proportionate to the hours they work.
- The supervision of part time staff should follow the same frequency patterns as for full time staff and should not be scheduled on a pro rata basis i.e. half-time workers being supervised once every two months.
- Local agreements can be reached for staff who work for 15 hours or less per week, but these must be agreed by the relevant service or senior manager.
- *The government established minimum standards for employers for the supervision of social workers in May 2014. Social Workers should receive regular and consistent supervision for at least an hour and a half of uninterrupted time.
- Social workers in their first year of employment (ASYE) must have at least weekly supervision for the first six weeks of their professional practice, and at least two weekly supervisions thereafter for the first six months and a minimum of monthly supervision thereafter. (1) The frequency of supervision for ASYEs ensures that supervisors are able to make informed decisions at an early stage about the development needs of the worker before the end of their six-month probationary period. Any such concerns must be relayed to the worker at an early enough stage to enable an appropriate action plan to be put into place. All ASYEs can expect that a Personal Development Plan will have been drawn up within the first month of starting in their role, which will include areas of future development

highlighted in their final placement report.

*"The Standards for Employers of Social Workers in England" May 2014.

- For Social Workers who have demonstrated capability at ASYE level or above, supervision needs to take place in line with identified needs, and at least monthly. (2)
- All **front line non- registered staff** should, during their induction period, have at least two weekly personal supervision for the first three months of their employment, at least three weekly personal supervision for the following three months and at least monthly personal supervision thereafter.
- Agreed supervision time must be given priority over other activities and should not be cancelled unless there are exceptional circumstances which affect the core business of the organisation. If supervision is postponed, then it should be rearranged at the earliest opportunity.
- If a supervisor is absent from work for a long period (over one month) the senior manager must ensure that effective arrangements are in place for the supervision of the staff in that team.
- It is the overall responsibility of the senior manager to ensure that appropriate alternative supervisors are identified to cover for any long-term absences.

Important
Change of supervisor and handover arrangements:

- Processes must be in place to ensure there is a supervisor allocated during times of change and that supervision is scheduled in advance.
- Supervisors and Supervisees have a joint responsibility to ensure that regular supervision is taking place.

1.8 Supervision Agreements

Supervision agreements clarify the responsibilities and role of the supervisor and supervisee. In Adult Social Care, it is expected staff will use the supervision agreement template (this can be found on Tri.X and the link is at the end of this document and in the appendix of the Quality Assurance Framework blueprint)

When establishing the supervision agreement, the following issues should be discussed and set out in the agreement:

- the purpose of supervision

- the frequency of supervision
- the venue / platform for the supervision sessions (note: this should always be in a private room where others cannot easily overhear)
- any specific responsibilities of both supervisor and supervisee

- the recording of supervision, including where records will be kept to safeguard confidentiality, whether records will be typed or handwritten, how quickly records will be given to the supervisee for signature
- the arrangements for any ad-hoc or unplanned supervision including the adding of work-related notes on to the person's records as per the recording section of this policy
- the complaints and review process
- 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)
- the arrangements for agenda setting (e.g. both parties to submit agendas before the session, at the start of the session etc.)

Supervisors must ensure agreements are current and signed by both parties:
- Supervision agreements are to be reviewed annually.
- A new supervision agreement is required when there is a change of supervisor.
- The agreement should set out a non-exhaustive summary of agenda items.

In some circumstances, staff employed by the Adult Social Care and Health directorate provide regular professional advice and support to staff employed by other agencies, directorates or sections of the directorate. In all such cases, a supervision agreement should be drawn up which accurately reflects the line management accountability for the individual's work including any case work decisions taken.

1.9 Allocation of Supervisors

All staff appointed into a supervisory position should undertake supervision training (this could mean e-learning) to enable them to fulfil their supervisory responsibilities and issues around supervision practice should be discussed in supervision.

It is the responsibility of the manager to make sure newly appointed supervisors have the support and skills when managing staff with capability issues for at least the first six months in their new role. This will require checking progress, coaching, providing advice, discussion and recording in the new supervisor's supervision and providing feedback on how the supervisor is doing.
It is the responsibility of the manager to ensure that the appropriate level of

supervisory experience is matched with the experience, knowledge and skills of the individual members of staff.

Occupational Therapists, employed as such**,** should be supported in their practice and development through regular professional supervision. Professional

clinical supervision must be from a suitably experienced Occupational Therapist. If this is not possible through the normal supervision route then a named person from another team can provide it or group supervision could be offered, where deemed appropriate.

Social workers must be provided with additional professional supervision by a registered social worker if their line manager is not a social worker. This is to support staff to engage in reflective practice. (The Standards for Employers of Social Workers in England, May 2014.)

1.9.1 Supervision Policy Statement Specific to AMHPS

All Approved Mental Health Professionals (AMHPs) contributing to the Kent AMHP Service rota will have supervision for their AMHP role and responsibilities as specified in the AMHP Operational Protocol.

1.9.2 Best Interests Assessors (BIAs)

Best Interests Assessors for MCA DOLS (Mental Capacity Act - Deprivation of Liberty Safeguards) will have professional supervision for their BIA practice through regular group supervision ahead of BIA forum meetings. They will also be able to access advice, information and supervision for specific cases or incidents from the MCA/ DOLS service management team.

It is recommended that BIAs employed by organisations other than KCC will adhere to their own employing organisational supervisory arrangements for their day-to-day work.

It is recommended that BIAs employed by organisations other than KCC as well as independent BIAs demonstrate they have access to professional supervision for their BIA practice where necessary.

1.10 Supervision records

Responsibility for recording ALL supervision (formal and any ad-hoc/informal discussions or decision making related to working with people drawing on care and support is with the supervisor – they are accountable for the decisions

The recording of work allocation and initial decision making is the responsibility of the line-manager, who may or may not be the allocated worker's supervisor.

1.10.1 Recording standards

The detail included in the formal supervision record is a matter of judgement for the supervisor. In general, the record should be detailed enough so that the issue, including the rationale for any decisions taken, can be revisited, if necessary, at a later date and still be understood. As a minimum, a short summary of any work discussion and the decisions or action points arising from it must be recorded.

All work decisions relating to people drawing on care and support must be recorded on the adult's file (this includes profile notes or contact sheets) and a copy made for each of the people discussed as soon as possible following the event/decision/action to ensure accuracy of records (as stated in the 'Recording with Care Practice Guidance', Standard 6). The retention period for supervision notes relating to people drawing on care and support is the same as the person's file.

All casework decisions must be recorded in the person's electronic file (this includes profile notes or contact sheets) and a copy made for each of the people as soon as possible following the event/decision/action to ensure accuracy of records (as stated in the 'Recording with Care Practice Guidance', Standard 6). The retention period for supervision notes relating to casework is the same as the person's electronic records.

Important: **Person identification and supervision notes**

Supervision notes detailing decisions relating to specific people are stored in the person's electronic file and therefore use of the person's name is acceptable.

Where there is a general discussion in personal supervision notes and it may be necessary to identify the person at a later date, initials and the person's recording system number on Mosaic are useful for identification purposes, although it is acceptable to use initials only.

Supervision records relating to the individual's professional development, line management and any personal issues should always be typed or handwritten, and two copies made.

The typing of supervision notes can be completed by the supervisor, or delegated to an identified administration officer, although this will need careful consideration in respect of any personal information that should not be shared and should be with the agreement of the supervisee.

An individual's personal supervision records (electronic or paper) must be kept by the supervisor and should be kept by the supervisee. This is to both safeguard the supervisor and supervisee in the case of investigations (e.g., disciplinary or complaints investigation).

Supervisors should aim to give a copy of the record to the supervisee for signature within two weeks. If this is not possible, the record should be available to the supervisee before the next supervision session. This should form part of the Individual Supervision Agreement.

All records should clearly detail any decisions that have been made, including the reasons for the decisions, any agreed actions including who will take responsibility, and the timescale for carrying out these actions.

All personal supervision records should be signed and dated by both parties. If there is disagreement as to the content of the record this should be recorded by the supervisor.

1.10.2 Confidentiality and Access

Supervision is a private, but not a confidential process. This means that the records belong to Kent County Council, not the individual. From time to time, records may be seen by (not exclusively):

- Senior Managers (e.g. for quality assurance purposes)
- Investigating officers (e.g. for disciplinary purposes)
- Inspectors (e.g. Care Quality Commission)
- Performance Management and Quality Assurance staff (e.g. for audit and quality assurance purposes)
- Complaint investigations

Access to supervision records should be controlled and all records should be securely protected so that others who do not have a legitimate right to see the records cannot access them.

Any supervisory action related to matters that are not directly work related should be managed at the discretion of the manager. However, any personal issues relating to safeguarding for adults and children or of a criminal nature will require

action under a duty of care. This should be discussed with the staff member at the time.

Supervision notes relating to case work may be used as:
- Evidence for the Court of Protection

- Evidence in criminal and civil court
- Evidence to support professional portfolios, including Kent Manager.

1.10.3 Storage and retention

It is a requirement that all supervision records are securely stored with the correct permissions applied, so that records can only be accessed by those who should have access.

The Individual Supervision Agreement and the personal supervision records should be kept electronically. It is a matter for the supervisor what other documents are held with the supervision records. These may include appraisal documents, sickness documents and correspondence.
If there are existing manual records, these should be scanned in.

Appraisal documentation held by individual members of staff must be kept during the current year + 1 year as specified in the KCC retention schedule, July 2019 (section HR 2.5.3)

All supervision records relating to social care case supervision must be kept for 6 years from termination of employment as specified in the KCC retention policy (section HR 2.5.4).

It is up to individual supervisors to ensure that these records are retained.

1.11 Quality Assurance

In order to be effective, the supervision process requires that monitoring and quality assurance arrangements are in place.
The quality assurance process ensures that the standards of supervision as outlined in this policy are being followed and that:
- All staff are being supervised professionally and effectively
- All supervision sessions are being recorded
- The supervision process promotes strengths-based, person-centred practice
- The supervision process promotes equal opportunities and anti-discriminatory practice.

Quality assurance arrangements should involve:
- The auditing of a random selection of supervision files and records on an

annual basis by senior managers for front line staff. This should include cross referencing with case files to quality assure decision making.

- Standard 6 of the "Recording with Care Practice Guidance" states that "Supervisors record that they have viewed the case file by noting any action within the staff supervision notes and regularly use the supervision case file

audit form, then filed with supervisee supervision records". The Supervision Case File Audit form is appendix 2 of the Recording with Care Practice Guidance.

- A discussion between the Senior Manager and the manager about their supervision practice. The senior manager may request copies of specific supervision records as evidence of practice and to use as a tool where there are developmental needs on behalf of the Manager.
- Regular Internal Audits.

1.12 Complaints and Disagreements

Supervisees should be clear about whom they should contact if they feel the terms of their supervision agreement are not being met. How supervisees make a complaint to their workplace senior manager should be included in the Individual Supervision Agreement.

Supervisees should always discuss any complaints or dissatisfaction in the first instance with their supervisor and endeavour to reach an agreement within the normal supervision process. If the complaint cannot be resolved by discussion with the supervisor, the supervisee should raise the issue with their supervisor's manager.

In some cases, there may be differences between the supervisee and the supervisor concerning work related decision making. In the event that this disagreement cannot be resolved by discussion, the supervisee should raise the issue with their supervisor's manager.

1.13 Monitoring

1.13.1 Required outcomes

This policy seeks to ensure that:
- All staff receive regular, effective and quality supervision.
- Supervision addresses best strengths-based practice through supporting staff.
- Managers address performance management issues through supervision as part of the Management Framework.

1.13.2 Review of outcomes

• An audit will be undertaken regularly and an audit report with recommendations will be presented to senior management.

1.13.3 Review of the policy
- A member of the policy team will review the policy 2 years from the launch of this policy.
- The amended policy will be presented to DMT for approval if the changes made warrant such approval.

2. Supervision practice guidance

This guidance section is written to help both supervisors and supervisees get the most of out of the supervision session. It supports the development of a reflective supervision culture.

2.1. What does supervision look like?

Supervision can be on a 1:1 in a quiet room, can be with peers or within a group.

- It looks like people actively engaged in a focused and purposeful conversation with space for reflection, for new ideas to develop, for assumptions to be challenged, for best strengths-based practice to be demonstrated or explored, for learning to take place.
- To support any type of good conversation and to ensure we are sending a clear message with the team as to the importance of supervision, attention must be paid to creating both a physically safe area (private, free from distractions / interruptions unless there are suitable urgent issues) and an emotionally or psychologically safe space. This means a relationship in which it is OK to experiment, be uncertain, unknowing and express emotions, where anxieties are acknowledged and contained, and dilemmas translated into doable tasks (with help provided to do tasks if needed).
- In order to help create this emotionally safe place, the supervisor needs to ensure they are available to be an active listener. This means them taking appropriate time and action to prepare themselves for the supervision session, so that they can remain focussed for the duration of the session. In turn, the supervisee needs to ensure they are willing to be open, honest and transparent and prepare themselves for supervision by thinking through solutions/ ways forward to the dilemmas/ questions they want to explore.
- Supervision does not have to be a conversation however it can also be an observation session with a plan to reflect on what was observed as close as possible to the observation.
- An observation session could be planned to observe a specific set of skills

that the practitioner is either practising following training, is not feeling so confident about or is really good at and you think they should demonstrate it to the rest of the team.

2.2. Tips for running a successful group supervision session

- Have a clear agenda and clarify with the group the purpose of the session – what it is for, and equally what it is not for
- Make sure everyone is clear about their roles and responsibilities during the session, including confidentiality in the group
- Establish some ground rules and ensure everyone commits to them
- Set a time for the session in a quiet, comfortable environment where people are likely to feel at ease about opening up and sharing
- Adopt good facilitation methodology and allow others to take the facilitation lead as they develop their skills
- Always record and share the decisions or actions that are agreed in the session

(Where appropriate, update individuals 'notes and care and support plans too)

- Periodically reflect on methodology: explore what works well and not so well with a view to improving the process

Effective facilitators:

- Plan in advance
- Take a neutral position and focus purely on the group process and desired outcomes
- Listen actively and ask questions that encourage and direct participation relevant to the goals of the group
- Draw out quieter members of the group and allow everyone a chance to participate
- Are not afraid of silence- they recognise when the group needs space to think
- Check for mutual understanding
- Keep the group focused on the agenda

Supervisees (and indeed the facilitator) should:

- Be prepared to listen actively and share openly
- Avoid taking the conversation off in directions that are not useful
- Show respect towards others
- Avoid dominating the discussion
- Be mindful of their duties regarding confidentiality

2.3. What does staff development look like?

- Accessing coaching. Coaching is about exploring the present and then moving forward and is based on the belief that we have the answers and solutions to our own question within ourselves; the coaching conversation

helps uncover those solutions in a non-directive way. https://kentcountycouncil.sharepoint.com/sites/KNet/Pages/coaching-andmentoring.aspx. Your KCC contact is Serena Cunningham. Useful if staff lack confidence, feel stuck or want to explore options in a safe space.

- Mentoring is a relationship where a more experienced or more knowledgeable person helps to guide a less experienced or less knowledgeable one.

- Secondment opportunities- useful to test whether another role is the right opportunity, learning new skills and knowledge
- Shadowing – learning by observing, questioning and reflecting, checking whether your planned career move is the right one.
- Presenting – a report/ a project proposal or evaluation, a piece of research or feeding back after training: learning to sound confident, thinking about how people receive messages, being clear, concise and focused, developing interpersonal skills, managing questions etc.
- Chairing a meeting – with focused feedback given afterwards
- Facilitating a group supervision/ a workshop/ a themed discussion/ a case review – managing a group, using preparation time effectively, keeping the discussion flowing, managing challenges, creating useful material, collaborating with colleagues
- Supporting a project – being the voice of a team/ a section- this could help someone understand KCC political context/ policy principles/statutory duties/ wider context/ impact on performance/ staff/ budget/ the lives of people drawing on care and support
- Being a champion – gain specialist knowledge/ networking skills/ understand how people receive information/ how people learn/ how to share information/ how other sections work

2.4. Focus on learning styles

It is imperative that at the start of any supervisory relationship, the supervisor explores with the supervisee their learning styles and considers this in relation to Kolb's adult learning theory, to ensure that workers are given the best opportunity to learn.

2.4.1 Kolb's adult learning theory

Kolb (David Allen, American educationalist theorist) proposes that experiential learning has six main characteristics:

1. Learning is best conceived as a process, not in terms of outcomes.
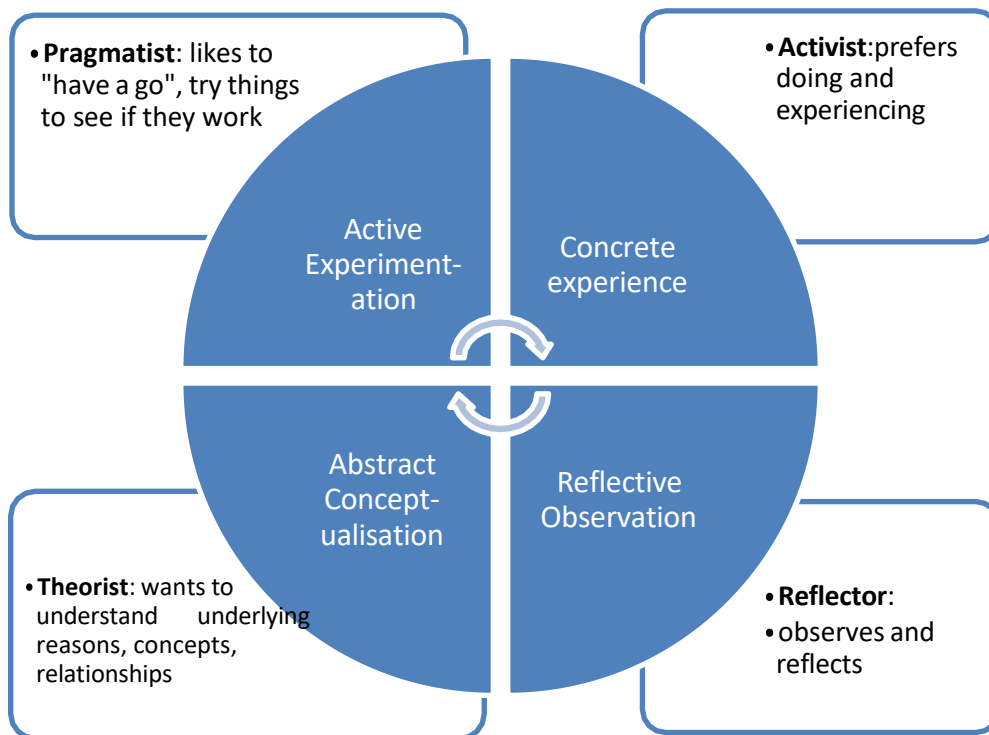2. Learning is a continuous process grounded in experience.

3. Learning requires the resolution of conflicts between dialectically opposed modes of adaptation to the world (learning is by its very nature full of tension).
4. Learning is a holistic process of adaptation to the world.
5. Learning involves transactions between the person and the environment.
6. Learning is the process of creating knowledge that is the result of the transaction between social knowledge and personal knowledge.

Kolb's experiential learning style theory is typically represented by a four-stage learning cycle in which the learner 'touches all the bases':

1. **Concrete experience** (feeling): Learning from specific experiences and relating to people. Sensitive to other's feelings.

2. **Reflective observation** (watching): Observing before making a judgment by viewing the environment from different perspectives. Look for the meaning of things.

3. **Abstract conceptualization** (thinking): Logical analysis of ideas and acting on intellectual understanding of a situation.

4. **Active experimentation (doing): Ability to get things done by influencing people and events   through action. Includes risk-taking.**

2.4.2 Learning styles

Based upon the work of Kolb, Honey and Mumford developed the concept of learning styles and identified 4 distinct learning styles or preferences as illustrated in the 2 diagrams below:

- **Pragmatist**: likes to "have a go", try things to see if they work
- **Activist**: prefers doing and experiencing
- **Theorist**: wants to understand underlying reasons, concepts, relationships
- **Reflector**:
- observes and reflects

Active Experiment-ation

Concrete experience

Abstract Concept-ualisation

Reflective Observation

Learning styles group common ways that people learn. Everyone has a mix of learning styles. Some people may find that they have a dominant style of learning, with far less use of the other styles. Others may find that they use different styles in different circumstances. There is no right mix, nor are styles fixed. You can develop ability in less dominant styles, as well as further develop styles that you already use well.

Workers will tend to enter the adult learning cycle at their preferred learning styles, and it is important that supervisors identify where these are in order to support workers to move around the cycle to aid their learning. It is also important to ensure that the supervisor does not constantly provide learning opportunities to their supervisee in the preferred style of the supervisor themselves and ensures that different material and learning opportunities are tailored to the learning style of the supervisee.

2.4.3 Characteristics of the four learning styles:

	Activists	Reflectors	Pragmatists	Theorists

Strengths	Doing Things Putting Ideas into action Enjoy change and variety Acting Quickly	Collection of data from variety of sources Looking at situations from various perspectives and grasping the big picture	Practical application of ideas Integrating theory into practice Decision making in organisations Getting things done	Creating theoretical models Thoroughness Industriousness Verbal skills Developing and working with systems
Preferences	New experiences Taking Risks Getting involved in activities with people Getting things done	More interested in people (how they behave and how they feel) than in structures To get involved directly and then reflect on the experience More concerned with processes than outcomes	More interested in structural aspects of situations than in people "Hands on" experience	Dealing with ideas Solving problems To know the experts view To work alone
Concerned about	Personal Relevance Doing what interests them	Personal meaning The feeling of others Maintaining wide ranging interests Harmony	Testing things out to get correct solution Practical application of what they learn	Details/ Quality of information Accuracy of facts Personal effectiveness Intellectual ability

The use of tools to identify a supervisee's learning style is important in supporting

them with their learning and development. Models such as the Honey & Munford learning style questionnaire and Neil Flemings' V.A.R.K model (http://vark-learn. /the-varkquestionnaire/) are good tools to use to enable supervisors to discuss with the supervisee their preferred learning style.

2.5. Focus on a coaching approach to supervision.

2.5.1 What is coaching?

The Association for Coaching (www.associationforcoaching.com) defines coaching as 'a facilitated, dialogic* and reflective learning process that aims to grow the individual's awareness, responsibility and choice (thinking and behavioural).'

2.5.2 What is a coaching approach?

A coaching approach can be defined as using the transferable elements of coaching in other conversations wherever they might be appropriate and helpful. Some of these transferable elements of coaching include:

- A focus on learning
- A focus on what's wanted
- A focus on the present and the future
- A focus on growing self-awareness and personal responsibility
- A focus on the other person's agenda and self-direction
- A focus on providing both support and challenge

2.5.3 Examples of coaching questions where the focus is on supporting the practitioner to explore their own solution to an issue, they want you to solve:

- What is the outcome you are looking to achieve here?
- How have you handled something like this before? ✓ What have you tried so far?
- Why do you think this is happening? / what's another way to look at this? What else can also be possible/true?
- What's your opinion on how to handle this? If I were not here, what would you do to achieve/resolve this? If we were to switch roles, how would you handle this? ✓ What could be your first smallest step in the right direction?
- What's the first thing you need to do? What would that conversation sound like when you talk with…?
- What resources do you need? Who else do you think needs to be involved in this?
- How else can I support you around your efforts to complete this?
- When would it make sense for us to reconnect to ensure you have achieved the result you want?

For more examples of useful coaching, reflective practice open questions, see appendix 1.

*dialogic: relates to or is characterised by dialogue and its use

Appendix 1: Purpose of Professional Supervision

Professional Supervision is a positive and enabling process that offers the opportunity to bring an employee and a skilled supervisor together to review and reflect on practice. This may include reviewing roles and relationships, evaluating the outcomes of the work and maximising opportunities for wider learning.

Effective supervision addresses the development of knowledge and skills and is an opportunity to consider the governance and quality of work, ensuring that professional standards are maintained, and policies and procedures of the organisation are adhered to. The key aspect of this activity is reviewing and reflecting on practice issues, as well as using different tools, such as coaching, to enhance professional growth.

It is important to remember that professional supervision sessions are different to managerial/operational supervisions, and therefore decisions related to workload or appraisals would not be made during these meetings.

Aims of Professional Supervision

- To improve practice to enhance the quality of services received by the people and their families drawing on care and support.
- To provide focus on our commitment to the professional development of every member of staff, highlighting the importance of their contribution.
- To promote a learning culture and recognise areas for ongoing learning and development, enabling people's potential and competency to grow.
- To support staff to achieve their own professional objectives.
- To increase awareness of evidence-based practice to ensure defensible decision-making.
- To promote good quality working environments where staff feel supported in their roles.

The role of the Professional Supervisor

- Establish a safe environment in which professional and practice issues may be explored.
- Give clear, concise, and constructive feedback where appropriate.
- Facilitate appropriate information, experience and skill sharing.
- Assist the supervisee in exploring, clarifying, and reflecting on feelings, perceptions and bias (conscious or unconscious) which may influence their practice, challenging unhelpful assumptions, unethical practice and attitudes if appropriate.
- Establish other factors that may impact on the supervisee's work, including working relationships with colleagues or personal circumstances.
- Ensure that appropriate steps are taken if any safeguarding issues come to light during the discussions.
- Record the agreed outcomes/recommendations of the session if / when appropriate and agreed by both the supervisor and supervisee.

Delivery and frequency of Professional Supervision

- 1-1 supervision sessions / group supervision sessions / combination of both
- Standard frequency would be every 12 weeks, but a variation to this may be agreed between the supervisor and supervisee.

What our Standards says; Professional supervision and Regulatory Body Requirements:

Health and Care Professions Council Standards - Professionals should be participating in supervision as part of their practise where possible.

Health and Care Professions Council Standards   https://www.hcpc-uk.org/standards/

Professional Capabilities Framework – Practitioners should take responsibility for obtaining regular, effective supervision from a professional supervisor to ensure effective practice, reflection, continuing professional development and career opportunities.

Professional capabilities framework https://www.basw.co.uk/social-work-training/professional-capabilities-framework-pcf

Social Work England's Professional standards - Social Workers should use supervision and feedback to critically reflect on practice, including how they use research and evidence to inform their practice, as well as identifying further learning needs,

Professional Standards https://www.socialworkengland.org.uk/standards/professional-standards/

Resources

Morrison T (1993) Staff Supervision in Social Care: an action learning approach. Harlow Longman.

Practice supervision is not line management supervision What is supervision? | (hcpc-uk.org)

BASW/CoSW England research on supervision in social work, with particular reference to supervision practice in multi-disciplinary teams England Document BASW Policy on supervision in social work, with particular reference to supervision practice in multi disciplinary teams

Supporting Social Workers through Coaching and Supervision. What's the difference? Supporting Social Workers through Coaching and Supervision. What's the difference? (linkedin.com)

This Resource Pack comprises a suite of 25 tools designed to help practice supervisors and supervisees, team leaders and organisations build, develop and consolidate reflective supervision in child and family services.reflective_supervision_resource_pack_2017.pdf (researchinpractice.org.uk)

Appendix 2: For supervisors Some useful coaching/ reflective practice open questions

The supervision process is a dynamic one therefore supervisors will select questions according to what is appropriate at any particular moment in the supervision process.

Try and identify types of questions that you use less frequently. For instance, if you are less confident with the analysis elements, there may be useful questions for you to use here. You might also note whether different staff members are more or less confident or open in response to different sorts of questions.

Focusing on experience

Here, the emphasis is on facilitating an accurate and detailed recall of events. supervisees can be assisted to recall more than they think they can recall if the right questions are asked. In these lists, "you" is the supervisee, "the person" refers to the person the supervisee is working with.

- What's your day been like so far?
- What happened before the intervention?
- What was your role?
- What was your aim? What planning did you do?
- What did you expect to happen?
- What happened? Identify different perceptions of co-workers.
- What did you say and do? What methods or interventions did you try?
- What did the person say, do or show?
- What reactions did you notice, to what you said/ did?
- What surprised or puzzled you? Who behaved differently?
- What stuck out for you? What were the key moments?
- What words, non-verbal communication, smells, sounds, images struck you?
- What did you notice about yourself, the person, your co-worker?
- What do you think others would have noticed about you?
- What didn't you notice? What or who was hard to observe?
- What observations or concerns do other agencies have?
- What went according to plan? What didn't happen? changes or choices did you make?
- What did you say, notice or do immediately after the session?

These questions can be enhanced by using other methods: detailed observation by colleague; learning diaries; incident logs or process recording.

Supervision Policy & Guidance - Adult Social Care and Health Directorate

1. Focusing on reflection

Reflection can enable the supervisee to explore their feelings, perceptions, beliefs and attitudes. This can help the supervisee explore how their personal experiences and biases can impact on their practice and decisions. Reflection can support the supervisee to make links between the current situation and his/her prior experiences, skills or knowledge.

- What did you feel at the start of the session? What feelings did you bring into the session?
- Describe the range of feelings you had during the session.
- What did the session/ your feelings remind you of?
- What previous work, processes, skills, knowledge are relevant? What patterns did you see in the session? Are these familiar?
- Where have you encountered similar processes?
- Describe a time when you last experienced that- what happened?
- Who/ what does this person remind you of?
- What did you think the person was feeling – based on what?
- What feelings might you or your co-worker be carrying on behalf of the person/ other workers?
- What other factors might influence how you, the person or colleague felt or reacted e.g. gender, ethnicity?
- Where and when did you feel most or least comfortable?
- Who seemed least or most comfortable – at what points?
- What thoughts went through your mind during the session?
- What ideas came to you during the session?
- What are the continuities or discontinuities between this session and previous work with this person or family?
- What did you tell yourself about what was happening, or about your feelings/
- What feelings were you left with? Does this always happen after seeing these kinds of cases?
- What metaphor or analogy would describe your experience of working with this situation?
- What was left unfinished?

2. <u>Focusing on analysis</u>

Here the emphasis is on analysis, probing the meanings that the supervisee and the person attributes to the situation, consideration of other explanations, the identification of what is not known or understood, and areas for further assessment:
- List 3 assumptions each that you, co-worker or the person brought with you into the session.

- How would you explain or understand what happened in that session? Note: It is important to identify and probe different perceptions.
- How would the session have been seen differently if: the person had been black; you had been a male or female worker; you had been working with another member of the family?
- 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 else could you explain what happened?
- How would the user explain what was happening in that session?
- What was the nature of the power relations during this session?
- Did power relations shift during the session-if so, why? What might this tell you about assumptions around gender, ethnicity, sexual orientation etc.?
- How far did this session confirm or challenge your previous understanding or hypothesis?
- What new information emerged? What was the critical moment?
- What bits of theory, training, research, policy, values might help you make sense of what was happening in this session?
- How else might you have managed the session?
- What are the current strengths, needs, risks for the different users?
- What is not known?
- What conclusion are you drawing from this work so far? (Note: Role perception influences analysis)
- How do you define your role in this situation?
- How does 'X' agency define your role in this situation?
- How do the person and their family define your role?
- What expectations does this agency have of your role?
- What family or community behaviours are acceptable to you?
- What behaviours or norms are acceptable to the family or community?
- What behaviours are acceptable to this or other agencies-why?

Other methods to assist analysis: sharing articles, references, case presentations, external speakers, attending training as a team, presentations by staff who have been on training, group supervision, action learning sets.

3. <u>Focusing on action plans</u>

The focus here is on translating the analysis into planning, preparation and action. This includes identification of outcomes and success criteria as well as consideration of potential complications and contingency plans.

- In the light of the reflection and analysis we've done, what is your overall summary of where things are at, and what needs to be done next?

- Can you identify what you are and are not responsible for in managing this situation?
- What training, supervisory, co-work and support needs have been raised for you?
- What information needs to be obtained before proceeding?
- What are your aims in this next phase of work?
- What is urgent and essential?
- What would be desirable?
- What is negotiable and what is non-negotiable in this situation?
- What would be a successful outcome?
- What are the different ways in which you could approach this?
- What might your strategy?
- What are the possible best or worst responses from the person?
- How can the person be engaged –what does they need from you?
- What contingency plans do you need?
- Who else needs to be involved (co-workers, supervisor, other agency)?
- What would you like from them?
- How well equipped do you feel to undertake this work?
- Where do you feel more or less confident?
- How can you prepare for this?
- What can I do as supervisor that would be helpful at this stage?
- Is there work you have previously undertaken that is similar to this?
- when and why does feedback and debriefing need to take place?
- Are there any safety issues for you or others?
- What can be done to minimise any risks?

Other methods include roleplay, co-work planning and work planning.

From: Morrison, T. (2002) **Staff Supervision in Social Care**. Pavilion Publishing.

Appendix 3: Resources

A vision for Supervision booklet by Innovative resources:

https://issuu.com/innovativeresources/docs/vision_for_supervision_booklet_for_

British Association of Social workers (BASW): UK Supervision Policy. May 20111

Changes Lives new Journeys- 50 first strength-based questions:
https://www.changedlivesnewjourneys.com/50-first-strength-based-questions/

College of Occupational Therapists: Supervision- Guidance for occupational therapists and their managers. 2015

Department of Health and Social care:

Shttps://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/778134/stengths-based-approach-practice-framework-and-handbook.pdf

Published February 2019. (look at model 2)

Morrison, T. (2002) **Staff Supervision in Social Care**. Pavilion Publishing.

RIPFA: Reflective supervision: Resource Pack (2017)

Rutter, L & Brown, K (2012) *Critical thinking and Professional Judgement for Social Work.* London: Sage.

SCIE: Effective supervision in a variety of settings (updated January 2017)

SKILLS for CARE: Effective Supervision in Adult Social care (2016)

Appendix 4: Remote supervision

As we enter a new era of more flexible working, remote or online supervision looks set to continue to be one of the options open to social care practitioners. The method used should be by agreement between the supervisor and the supervisee. This may be a blended approach.

When using remote supervision and in order to facilitate communication, it is expected that both parties will have their cameras on.

There are a few things that are different in an online supervision session and below are suggested ways of dealing with those differences so that the session continues to be relational, emotionally literate, reflective, and professionally curious in order for the supervision to provide the effective support needed.

The suggestions below are for both parties:

1. **Agree an agenda in advance** by email / collaboration platform and allow for some extra time as it is important to acknowledge that there may be interruptions or connectivity issues.

2. **Confidentiality and privacy.** Acknowledge that one or both of you may be working at home around family members, children and/or pets so there may be interruptions (although all parties should ensure this is kept to a minimum). The blur background feature in video calls can improve privacy.

3. **Ring fence time at the start to talk about the process of connecting remotely for supervision.** At the outset of the supervision meeting, make a contingency plan in case of connectivity breakdowns. Share expectations and agree ground rules

about what it is realistic to achieve in remote supervision and how much this may impact on the ability to speak freely.

4.   **Active-listening** is really important in supervision. Listening skills are conveyed by being attentive to the speaker and therefore our body language becomes even more important when using online video platforms.

5.   **Make time to talk about carrying on working during and post a global pandemic.** As a supervisee, you may feel you need more guidance, support or direction than was the case before the pandemic. As you near the end of the session, pay more attention to reviewing your discussion and clarifying that decisions or actions you have discussed are clear. It can be helpful to plan together what the next priority actions are and talk through daily or weekly priorities.

6.   **Remember** that even a blended approach (face to face and online) should mean more frequent contact between supervisee and supervisor to ensure that the "ad hoc" or "open door" approach in the office is replicated (as much as practicable) by having an open door policy online.

   This means that, just as we expect a recording of informal discussion related to people we are working with, practitioners will need to record key points of a virtual discussion in line with point 1.6 under section 2 "supervision methods" in this document.

 Helpful sites:

The [PSDP Resources and Tools for Practice Supervisors](#) open access website contains over 100 resources to support practice supervision in children's social care. These are open access to use and share and were developed to support children's social care but are relevant to practice supervisors in a range of settings. https://practice-supervisors.rip.org.uk/supervisors-home/

https://kentcountycouncil.sharepoint.com/sites/KNet/cype/cypedocuments/Supervision%20Learning%20Flyer.pdf#search=al%20supervision

https://www.researchinpractice.org.uk/all/news-views/2020/april/supporting-remote-andonline-supervision-during-covid-19/