Supervision Policy, Standards, and Criteria for Social Workers and Social Care Workers

in
Acute Services Directorate
Mental Health & Disability Directorate
Older Persons & Primary Care Directorate

October 2009
ACKNOWLEDGMENTS

This document is based on the document ‘Supervision Policy, Standards and Criteria’ for social work staff in children’s services which was published by DHSSPSNI Reform Implementation Team (RIT) in February 2008.

The Trust Social Work Forum established a working group to produce a social work supervision policy for use in adult’s services Directorates. Appreciation is extended to the members of the group for their work on its development.
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1.0 Supervision Policy

1.1 Introduction

This policy sets the framework and minimum standards for Health and Social Care Trusts to implement an effective and consistent approach to social work and social care supervision practice.

Supervision and appraisal are the most important ways of ensuring staff deliver a high standard of service, carry out their duties according to policy and procedures and meet departmental and corporate targets. Supporting staff through supervision improves working practices and contributes to better service delivery and outcomes.

1.2 Purpose and Aims

The aims of this policy are to define:

- The menu of supervision models to be adopted for all social work and social care posts within adults services Directorates in order to support high quality practice and develop the professional competencies of all those involved
- The rights and responsibilities of these staff in respect of supervision
- The standards to be met
- The means by which the practice of supervision will be qualitatively assessed and monitored.

1.3 Policy Statement

The Trust will provide supervision to social work and social care staff in accordance with the professional standards as detailed in this Policy. This is recognized as a key method of ensuring that the Trust delivers its statutory responsibilities as outlined in the Scheme for the Delegation of Statutory Functions (March 2008). It is also critical in ensuring the delivery of safe, high quality care and plays an important part in the ongoing development of a competent workforce.
1.4 Scope

This is a mandatory policy. It applies to the supervision of all social work and social care staff in the undernoted Directorates within the Southern Trust:

- Acute Services
- Mental Health & Disability
- Older People & Primary Care

These social work/social care staff include:

- All social work staff (including social workers on the assessed year in employment)
- All social care staff (except domiciliary care staff)
- Senior social work practitioners
- Team managers (where social work by profession)
- Heads of Service (where social work by profession)
- Senior managers (where social work by profession).

This Policy should be read in conjunction with:

- Northern Ireland Social Care Council, Code of Practice for Social Care Workers (September 2002)
- Northern Ireland Social Care Council, Code of Practice for Employers of Social Care Workers (September 2002)
- Northern Ireland Social Care Council, Registration and Regulation of the Social Care Workforce: Guidance for Employers (May 2006)
- Southern Health & Social Care Trust, Capability Procedure (September 2008)

1.5 Definition and Functions

Morrison (2001) defines supervision as:

‘a process in which one worker is given responsibility by the organisation to work with another worker(s) in order to meet certain organizational and professional objectives.’

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1 Arrangements for domiciliary care staff are to be agreed.
The aim of supervision is to improve the quality of work in order to optimise service users’ capacity to lead independent and fulfilling lives.

The functions of supervision are:
- Management (ensuring competent and accountable performance)
- Development
- Support
- Engagement (engaging the individual with the organisation)

1.6 Literature/ Research

There is now a substantial body of literature and research into the practice of supervision within social care that demonstrates that in many cases supervision has not met minimum standards or been of the requisite quality. A key theme is that of the four functions (see above) the management function takes precedence over the others, especially the development and support functions – with the unfortunate consequence that the latter two functions are given insufficient attention. This is a significant shortcoming as a competent and confident workforce is central to the provision of quality services and to the efficient operation of social work/care services. In additional few social care organisations have audited supervision to ensure that it is of the requisite frequency and quality.

The McLernon Report (1998) which examined the suicide of Mr Frederick McLernon and the role of health and social services in his life made four recommendations (Numbers 14, 22, 43 and 46) in relation to professional supervision based on deficits in care practice. These recommendations focused on the necessity of professional supervision, the monitoring of assessment practice, the identification of unmet need, the importance of relevant theoretical knowledge and social work principles and the adequacy of decision making.

More recently the O'Neill Inquiry Report (2007) into the circumstances of Mrs Madeleine O'Neill who took her daughter Lauren’s life and then killed herself reinforced the requirement that Trusts have supervision policies in place that, among other things, have arrangements to monitor the effectiveness of practice interventions and appropriate record keeping.

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In addition a range of policies and reports in the field of adult protection emphasize the role of supervision in supporting staff involved in reporting, investigation and working with victims of adult abuse.

The DHSSPSNI regional child protection report (2007)\textsuperscript{4} made similar observations including there being:

- Inconsistencies in the frequency and quality of social work supervision
- Few formal processes whereby senior managers agreed targets for supervision
- Little evidence of alternative arrangements being made where supervisory arrangements were disrupted e.g. managers were on sick leave
- A weakness in helping social workers to apply theoretical concepts and models
- Inconsistent recording of decisions made in supervision
- Little formal auditing of supervision.

\textbf{1.7 Core Values and Principles}

These are the core values which underpin the policy and the ensuing standards and criteria:

1. Supervision must ensure the effective management of practice, develop and support staff and promote their engagement with the organisation.

2. The quality of supervision has a direct bearing on the quality of service delivery and outcomes.

3. All staff, irrespective of their role, have the right to receive high quality supervision which meets the standards of this policy.

4. All staff have responsibility for the quality of their own work and, to this end, should prepare for and make a positive contribution to the supervisory process. They are not passive recipients.

5. Senior managers have a responsibility to promote good supervision by implementing this policy and ensuring training is provided for both supervisors and supervisees.

6. Senior managers need to conduct regular audits to ensure that this policy and standards are being implemented.

7. Supervision must promote anti discriminatory practice and respect for the privacy and dignity of service users and carers.

8. All practice must be consistent with the Northern Ireland Social Care Council Codes of Practice.

9. Effective supervision must promote adherence to the corporate governance framework and is an important element of risk management.

1.8 Responsibilities

Overall responsibility for ensuring the implementation and quality of social work and social care supervision rests with the Executive Director of Social Work. Social Work Leads in each Directorate are responsible for ensuring the effective implementation of the policy within their respective Directorates including the identification of a named professional supervisor for each member of social work and social care staff. Heads of Service are responsible for implementing the policy within Teams and for conducting regular audit of compliance. Operational and Professional supervisors are responsible for co-operating to ensure delivery of all aspects of the supervision policy to practitioners.

Supervision is a process not an event. It entails preparation, open discussion and the implementation of decisions. Both supervisors and supervisees have a responsibility to contribute positively to this process. Supervisors should ensure adherence to the standards outlined in this policy.

Supervisees will make a substantial contribution to the quality of their own supervision by:

- Making suitable preparation for meetings through preparation of an agenda
• Ensuring that actions agreed within supervision are carried out in a timely manner and evidenced in the case file

• Notifying the supervisor of any difficulties in implementing decisions or plans

• Identifying development and support needs

• Understanding and implementing policy

• Ensuring diversity is integrated into all work and records

• Highlighting areas of learning in relation to his/her own professional development

Where the supervisee is a practitioner s/he will also contribute to the supervision process (and promote high quality service delivery) by, for example, ensuring that:

• Where required, there is a written care plan for each service user

• Service user’s care plans are in place identifying care objectives, intervention provided, programme agreed and review dates

• Case files contain clear assessments, plans and summaries

• Case records and all social care records are available for supervision

• Issues of a child protection or vulnerable adult nature are discussed with reference to the procedures, including agreed interventions

• The supervisee outlines processes re multi-disciplinary assessment and discharge planning/case closure

• The supervisee highlights unmet need

• The supervisee highlights areas of concern for example issues with own professional performance or that of other professionals, or cases which may present professional or organisational challenges.
The supervisee has a responsibility to keep the supervisor informed of urgent developments and to seek out advice and guidance outside of formal supervision meetings when required and to record the outcome of same. In addition, the supervisee has responsibility to implement guidance given on such occasions.

Supervisors will make a substantial contribution to the quality of supervision by adhering to the standards set out in Section 2.

Neither supervisors nor supervisees are likely to maximise the benefit of supervision unless they are adequately trained to understand their responsibilities and the supervision process. To this end an outline of supervision, its purpose, responsibilities and processes will be provided in the Social Services Induction Programme for social work students and newly employed social work and social care staff. Training for supervisors will be provided on an annual basis in the Social Services training programme.

1.9 Methods

The principal method of supervision for social workers within the Trust is one-to-one supervision by a professionally qualified social worker—where one worker is given the responsibility to work with another worker to meet certain organisational, professional and personal objectives. Where the operational manager is not a social worker, this supervision policy will be delivered by the operational manager and an identified professional supervisor. All grades of social worker should receive professional supervision in the organisation up to Assistant Director level.

However, it may be unrealistic to expect one-to-one supervision to meet all four supervision functions for all staff all of the time. There is a menu of options which can be considered for use in certain settings and especially in relation to social care staff. These are as follows:

- One-to-one supervision: This is best suited to staff carrying their own individual caseloads
- Joint supervision: This is most suitable when two staff are engaged in the same piece of work eg co-working a case or running a group

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5 Good Practice Guidance: Professional and Operational management Interface within the Integrated Care Teams SHSCT 28 October 2009
• Group supervision: This best suits the needs of staff working in group care settings or where team working/development is a priority

• Peer group/mutual support supervision: This might be used with an experienced group of staff undertaking a specific piece of work where they monitor and review progress and provide one another feedback on their performance

• Consultation: This is where specialist expertise outside the team is utilised as an additional resource

• Live supervision: This is where direct observation is used as a form of supervision

• Support groups: In certain areas of practice it may be appropriate for support groups to operate eg practice teaching, approved social work. When these groups examine practice issues they can be categorised as group or peer supervision and can incorporate a training and development aspect

• Mentoring: This can be used in any work situation to supplement the formal supervision arrangement.

Where these methods of supervision are used, there should be agreed arrangements with the manager for the recording of the supervision and any decisions reached. These should be available in the staff member’s personal file and where appropriate in the service user file.

In Residential Units and Day Care and Supported Living settings in particular, the above models may have relevance. Given that the work often takes place in a group setting and the observations of skills and competence is inherent in the work, the workplace itself can be an evidence base for supervision. It is acknowledged that, with the other methods available, individual supervision may be of shorter duration. The guiding principle, irrespective of which methods are used, is that the line manager is responsible for ensuring that all four functions of supervision are formally addressed. Every social worker and social care worker should receive monthly supervision delivered by a combination of the above methods and individual supervision at a minimum of 3 monthly intervals.

1.10 Knowledge and Skills Framework
All staff in Health and Social Care are now required to complete the Knowledge and Skills Framework (KSF) Performance Development Review (PDR) on an annual basis.

The KSF Performance Development Review provides an opportunity for the staff member to reflect on their knowledge, skills and values in a structured way, focusing on the knowledge and skills required for their job outline. The manager completes the performance review form at the PDR meeting. Individuals will be assessed on their examples of practice and the worker and manager will need to identify the most relevant examples in order to meet the requirements. Professional supervision will make a valuable contribution to the PDR.

It has been agreed by the Northern Ireland Social Care Council (NISCC) that the KSF Performance Development Review form may be used for meeting the post registration requirements for NISCC. The Personal Development Plan (page 8 of the KSF Performance and Development Joint Review) will suffice as the Training Plan required for the NISCC post registration requirements (Training and Learning Plan). Staff can photocopy the Personal Development Plan and put this in their NISCC folder, to be presented to the NISCC on request.

1.11 Quality Standards

The Quality Standards for the Health and Personal Social Services (HPSS in Northern Ireland) identifies corporate leadership and accountability as key themes for all health and social care organisations.

The standards state that “HPSS organisations and professionals must provide effective leadership and clear direction to make the most of its people, skills, time and money so as to deliver safe, sustainable and high quality services in health and social care”.

The ability of the organisation to reach and maintain the standard will be dependent on the workforce and the opportunities for support and continuous improvement.

A key component which will measure the quality of services provided is staff supervision. Supervision provides an opportunity to reflect on standards of practice and also consider the needs of the individual in terms of support and continuous professional development. This is prescribed within the following standards.
1.12 Confidentiality

Supervision sessions are, in general confidential exchanges between supervisor and supervisee. However, the supervision record is an organisational document which may be seen by others for e.g. audit, reviews of practice, inspection purposes, where there are grievances or disciplinary proceedings, without the consent of the parties involved. The supervision agreement should clarify the constraints upon confidentiality. As the keeping of these records will eventually involve electronic recording, security access levels will need to be agreed. It should be noted that the personal file will move within the organisation with the individual.

1.13 Recording

Supervision should always be recorded in a timely manner and in such a way that the content and decisions can be readily understood and audited. All notes of individual supervision should be signed as agreed records at the end of a session or within 10 working days (appendix 2(a)). Personal information will only be recorded where it is causing concern in relation to the individual’s work performance. The supervision agreement should state how supervision will be reviewed, including feedback about quality and helpfulness (see appendix 1).

Written notes should be maintained by the supervisor with a copy for the staff member. Where other staff are providing aspects of supervision/mentoring this should also be recorded and forwarded to the supervisor. The supervisor will hold a copy of all supervision records in the supervisee’s personal file along with the supervision agreement, the PDR and the PDP. In addition, records of cases discussed in supervision will be retained on the client file. Where peer, group or joint supervision occurs there should be clear arrangements for recording same and adding the record to the supervisee’s personal file.

It is the supervisee’s responsibility to record any case-related decisions on the case file. They should make it clear with whom they have consulted, especially if a decision is made outside a formal supervision meeting (an ‘impromptu’ consultation) or involves another manager. The manager should agree and sign the record.

Supervision records are subject to a retention period of five years except where they form part of the client file when they will be subject to the same retention period as the file. When a supervisee moves within the Trust, the supervisor should forward the personal file to the
new supervisor. When a supervisee leaves the Trust, the supervisor is responsible for forwarding the personal file to the closed record store as per closed records policy.

1.14 Quality Assurance/Audit

Quality assurance is the responsibility of supervisee, line manager and senior management.

The line manager should always include discussion on record keeping with all staff who are being supervised by them. Records of all such discussions should be available to senior management for audit purposes.

The line manager should read a sample of the supervisee’s case records regularly to ensure adherence to policy and the quality of work undertaken. From this s/he should select a number of cases to review in supervision. Records selected should always include cases involving the protection of vulnerable adults and where appropriate the protection of children.

Where a manager or senior manager views records as part of supervision or audits s/he should countersign the case file.

Senior managers are also responsible for assuring the quality of supervision and the performance of their staff. To this end they should regularly audit small random samples of case files and supervision records to ensure adherence to policy and the provision of high-quality supervision. Appendix 3 has a template pro forma for this.

It is not realistic for senior managers to review all case/supervision records. The key is regular audit of small samples – maybe six or eight such records. It may be productive to review case records thematically i.e. to examine assessments of new referrals, case closure decision making and adult protection processes.

These processes are described in standard 12 (in addition see the pro forma for case file audit in appendix 3).
2.0 Supervision Standards and Criteria

Standards are used in many different areas of life. They describe the basic level of performance or ability that is required for a product or service to be effective and do the job it was designed to do.

In this case the standards define what needs to be in place in order for agencies to ensure a consistent approach to supervision at all levels and across the Trusts. Under each standard are a number of criteria – indicators that will help decide whether this standard has been met.

**Standard 1**
All staff are provided with formal and regular supervision.

<table>
<thead>
<tr>
<th>Criteria for qualified social workers:</th>
<th>Criteria for social care workers:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Qualified practitioners receive formal one to one supervision at monthly intervals.</td>
<td>• Formal supervision as a minimum at monthly intervals. This may be delivered by a range of methods but must be on a 1:1 basis every 3 months</td>
</tr>
<tr>
<td>• For those staff undergoing the assessed year in employment, the requirement is fortnightly supervision for the first 3 months and monthly thereafter.</td>
<td>• A supervision session lasts on average between one and a half to two hours. In addition time will be needed for preparation and recording.</td>
</tr>
<tr>
<td>• An individual supervision session lasts on average between one and a half to two hours. In addition time will be needed for preparation and recording.</td>
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**Standard 2**
All forms of supervision are arranged and conducted in such a way as to permit proper reflection and discussion.

Criteria:

• Supervision is not subject to cancellation and is only postponed in exceptional circumstances. Any postponed session is
reconvened at the earliest opportunity and in all cases within 6 weeks of the cancelled session

- Where the supervisor is absent long-term from work (because of e.g. sick leave) alternative arrangements should be made by senior management to provide supervision

- Supervision takes place in an environment which affords privacy and where arrangements have been made to avoid interruptions (other than in circumstances described in the supervision agreement)

- Supervisors should follow the protocol for staff debriefing following joint video evidence interviews

- A record is kept of any cancellation and the reason noted.

**Standard 3**

All supervisory relationships are subject to a written agreement to be drawn up within the first six weeks of the start of the relationship, (see appendix 1).

Criteria:

The agreement addresses:

- Respective roles and responsibilities

- The frequency of supervision

- How agendas are to be drawn up

- How the supervision sessions are to be recorded

- How confidentiality is to be maintained – and what the limits are to this

- How KSF Performance Development Review requirements are to be met

- How differences in the working relationship are to be managed

- How the principles of diversity (within the supervisor/supervisee relationship and in service delivery) are to be handled
• How and when the agreement is to be reviewed.

**Standard 4**

Supervision is a planned and purposeful activity.

Criteria:

• Both supervisor and supervisee prepare for supervision by identifying issues to be addressed

• An agenda will be drawn up in advance of any supervision meeting. Both supervisor and supervisee may contribute to this

• Decisions made at the previous supervision meeting are reviewed to ensure actions have been taken, (see appendix 2 pro forma).

There is a further criterion under this standard in relation to the protection of adults and where appropriate the protection of children. This is:

• The supervisor reads a sample of the supervisee’s case records regularly in line with Trust policy. S/he must sign and date the records to indicate they have been read. From this s/he selects a number to review in supervision.

**Standard 5**

All supervision sessions should be recorded promptly, competently and stored properly.

Criteria:

• The supervision record is recorded on the relevant pro forma, signed by the supervisor and supervisee and placed on the supervisee’s file by the former within, other than in exceptional circumstances, 10 working days. A copy should be handed to the supervisee. This record would normally only be read by more senior management for the purposes of auditing the quality of work and supervision
• All records relating to cases (whether individual or joint supervision or ‘impromptu’ discussions) are recorded on the relevant file/pro forma (see appendix 2b) by the supervisee, signed by the supervisor other than in exceptional circumstances in 10 working days. The supervisee should place these on the case file

• Records demonstrate that issues of dignity and diversity have been addressed both in the supervisory relationship and service delivery

• All supervision records should be legible and clearly signed and dated by supervisor and supervisee.

**Standard 6**

Supervisors and supervisees are trained to carry out their role.

**Criteria:**

• Professional induction of all staff addresses the supervision policy and standards

• All social services Team Leaders and managers will complete training in supervision and appraisal within two years of appointment (PSS Development & Training Strategy 2006-2016, page 15)

• For social workers, the Regional Professional Supervision course linked to the NI Post Qualifying Framework is the appropriate vehicle to meet this requirement

• For social care supervisors an in-house course in supervisory skills should be accessed within one year of appointment

• Refresher training is available to supervisors (e.g. peer discussions, action learning, critical reflective practice workshops) to consolidate skills and is discussed within the supervisor's annual appraisal

• Supervisors receive regular feedback from their managers regarding their performance and from supervisees as part of their appraisal process
• Supervisees attend training in first year in practice to ensure continuing professional development. This is provided in the Social Services Professional Induction Programme

• All social work/social care staff should have regular refresher awareness raising on the supervision policy.

**Standard 7**

The supervisor ensures that the management (competent, accountable performance) function is met.

Criteria:

Supervision meets this function by ensuring that:

• Agency policies and procedures both professional and corporate, are understood and adhered to

• The supervisee’s workload is managed and priorities are set

• Cases are assessed, services allocated and decisions made about closure in line with Trust policy and procedure

• The quality of the supervisee’s performance (including anti-discriminatory practice) is measured. Where staff are under performing, further action may need to be considered in accordance with the Trust Capability Procedure and NISCC Codes of Practice

• Statutory responsibilities are addressed

• Risks are identified, assessed in line with policy

• Work is allocated according to the experience and skill of the practitioner and the team’s/ agency’s business plan

• Case recording, including daily records are of the requisite standard

• Case files are audited as per Trust requirements

• Case plans are devised, implemented, reviewed and recorded on the case file
• Any advice/consultation on case work given outside formal supervision by the line manager or other manager should be recorded by the supervisee and countersigned by the manager and placed on the case file

• The needs and desirable outcomes of service users and carers are understood; and that risks are identified and countered

• Appraisals take place, supervisees have opportunities to meet objectives set in these and that the objectives are reviewed on a regular basis.

**Standard 8**

The supervisor ensures that the continuing professional development function (including the post registration training and learning requirement (PRTL) set down by NISCC) is met.

Criteria:

Supervision addresses this function by:

• Helping staff to develop their professional competence

• Enabling relevant staff to achieve NISCC Induction Standards and registration

• Enabling staff to complete the KSF Performance Development Review

• Enabling staff to meet their post qualifying requirements where appropriate, and training requirements related to their ongoing registration with NISCC

• Helping staff to initiate fresh ways of working in response to changing needs, including through the use of technology

• Enabling staff to relate theory and research to practice

• Assessing training and development needs

• Developing skills and knowledge

• Helping workers to reflect on their work and interaction with service users and carers
• Providing feedback on performance
• Discussing knowledge and skills gained in training events and identifying opportunities to integrate these into the supervisee’s work.

**Standard 9**

The supervisor ensures the support function is met.

Criteria:

Supervision addresses this function by:

• Supporting staff to cope with the stresses that the work entails
• Offering advice on the help available to cope with stress arising from work related and personal issues
• Creating a safe climate for workers to examine their practice
• Helping workers explore the effect of the work on them, both personally and professionally
• Helping workers explore emotional blocks to the work
• Monitoring the overall functioning of workers, especially with regard to the effects of stress, team dynamics and relationships.

N.B. It is important to distinguish between support and counselling. Whilst the impact of the work on the supervisee is an appropriate focus of supervision, seeking to resolve the personal problems of the supervisee is not. Staff support services should be easily accessible for all staff.

**Standard 10**

The supervisor ensures the engagement (of the individual with the organisation) function is met.

Criteria:

Supervision addresses this function by:
• Communicating effectively with staff about organisational changes and initiatives

• Briefing management about resource deficits

• Representing staff needs to management

• Seeking policy clarification

• Consulting with staff and feeding back to management on how organisational policies/practice is perceived

• Arbitrating between team members when required

• Negotiating on differences which may arise between supervisors and other professionals, teams or services.

**Standard 11**

Supervision promotes a commitment to diversity in all aspects of work (i.e. that all service users and carers are entitled to the same quality of service irrespective of ethnicity, culture, religion, language, gender, age, disability or sexual orientation).

Criteria:

Supervision addresses this function by ensuring that:

• All assessments, plans and interventions address the implications of the client’s ethnicity etc (see list above)

• That staff show appropriate attitudes and behaviours towards service users, respecting their right to clear and appropriate communication and to privacy and dignity.

• The potential vulnerabilities of specific user groups (e.g. disabled/ deaf) are identified and countered

• Discrimination that service users and their carers may experience is acknowledged and, in so far as this is possible, countered by service provision
• There is effective communication with all service users and their carers (this to include e.g. those for whom English is a second language or who are disabled)

• All children and vulnerable adults receive an appropriate level of protection

• Service users and their carers receive appropriate services irrespective of ethnicity etc (see list above).

**Standard 12**

Managers assure the quality of supervision.

Criteria:

• If any functions of supervision are undertaken by a third party, the manager coordinates the process and ensures effective communication

• Senior management ensures there is an audit, at least once every 6 months of a small sample of:
  
  ○ Case files to track the decision making process, actions and outcomes
  
  ○ Supervision records placed on casework files and on supervision files

• Senior management conducts an annual audit of supervision practice.
3.0 Supporting Documents

3.1 Appendix 1 - Supervision Contract

[NB: This document can be amended for use in specific settings e.g. group care]

This document should be read in conjunction with the Trust’s supervision policy and standards document. All staff you supervise should be given a copy of this. It is designed to help the supervisor and supervisee construct a contract in which expectations are clear. It should act as a template rather than be simply copied. However, in amending it staff should be careful to adhere to the policy and standards. Where a member of staff has different operational and professional supervisors, both should meet with the supervisee to agree the contract.

This contract is between supervisor ___________ and supervisee ________

**Frequency, Length and Location**

We will normally meet at _____ intervals. Our supervision session will last on average for _______. We will meet in a location which is private. Interruptions will be kept to a minimum.

**Agenda and Structure**

There should be a statement about the structure of supervision for the particular setting e.g. combination of 1:1 and group supervision.

We will both prepare for supervision by identifying cases/issues to be addressed. We will notify each other of any major issues to be addressed in advance (in writing if applicable). An agenda will be drawn up at the start of the supervision session. This will always include:

- Oversight of new referrals and assessments
- Decisions about service provision and closure
- Cases involving the protection of children and vulnerable adults
- Audit of selected files.
**Functions**

Supervision will cover:

a) Management (ensuring competent/accountable performance, case guidance, decision making)

b) Development

c) Support

d) Engagement (engaging the individual with the organisation).

**Additional requirements for KSF and professional development.**

The supervisee has a personal development plan detailing the learning and development taking place in the coming months. This will be addressed in supervision along with any requirements emerging from regulation e.g. assessed year in employment, NISCC continuous professional development.

The KSF Review is a separate function from supervision. The KSF Review may take place following a supervision session but will be distinct.

The supervisor will support the above processes in supervision by e.g.:

- Considering how the supervisee is applying his/her knowledge and skills
- Reviewing progress against the development plan and identifying opportunities
- Providing feedback around the skills and performance of the supervisee (thus making a transparent and ongoing input into Gateway Reviews).

**Equalities Issues**

Supervision will be based on anti-discriminatory principles and respect for the dignity of the persons involved and sensitive to differences
between our backgrounds and experiences. We will deal with these differences by ________________________________

**Record Keeping**

All supervision sessions will be recorded on a pro-forma (see appendix 2) by (the supervisor) and passed to the supervisee within stipulated timescales (see policy and standards).

**Confidentiality**

The recording of personal information will be treated sensitively and the record will contain only that information deemed necessary for effective supervision. There are however constraints on confidentiality in that supervision records may be accessed by senior management for e.g. audit and inspection, grievances and disciplinary purposes without the consent of the parties involved.

**Disagreements**

Areas of disagreement between us will be recorded on the supervision records. In the first instance we will seek to resolve differences within supervision. However, if they cannot be resolved either of us may refer these to the supervisor’s line manager.

**Review of Supervision**

Supervision session process, content, length, frequency, format and style should be reviewed by the supervisor and the supervisee on a six monthly basis.

Feedback on the quality of the supervision will be given by the supervisee to the supervisor by the following method _________________________________(please state frequency too).

**Absence of Supervision**

Trust policy requires that supervision be provided at stipulated minimal intervals. We will only postpone supervision in exceptional circumstances. In all cases supervision should be rearranged within 6 weeks.
Should supervision not take place e.g. long-term sickness, failure to adhere to the supervision timetable, we will refer this to (the supervisor’s line manager).

**Specific Expectations**

Our expectations of each other are as follows:

______________________________
______________________________
______________________________
______________________________

If anyone other than the line manager is going to take responsibility for some part of the supervision process (mentoring, action learning etc) then this should be clearly recorded below and the process specified for regular review and communication.

Signed: Supervisor ___________________ Date ___________

Supervisee ___________________ Date ___________

_________________________________________________________________________________________________________________________________
3.2 Appendix 2: Staff Supervision Record Pro-Forma

It is very important that supervision is recorded in a structured way. The following example can be adapted to meet local needs and managers are advised to use them as models when designing their supervision record-keeping system.

Supervision should address the following five themes:

- Management (competent and accountable performance)
- Development
- Support
- Engagement (with organisation)
- Caseload management/weighting

The table below should be used to record briefly what was discussed and any decision and actions.

When discussing cases, only record minimal information on this form. All case decisions and actions should be fully recorded on pro-forma (b) and a copy placed on the client file.

The supervision record should demonstrate that issues of respect, dignity and diversity have been addressed in the supervisory relationship and service delivery.

Appendix 3: Case Supervision Record Pro-Forma

This form should be used to record any case actions and decisions made in either formal supervision or impromptu consultation. It does not replace other methods of recording formal decisions such as reviews and planning meetings.

Once completed a copy should be placed on the client file.
## SUPERVISION RECORD PRO-FORMA
### STAFF SUPERVISION RECORD

Supervisee: ________________________   Supervisor: __________________

Date: ________________________

<table>
<thead>
<tr>
<th>Items Discussed</th>
<th>Action by Whom/Timescale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management (ensuring competent/accountable performance) (refer to Standard 7)</td>
<td></td>
</tr>
<tr>
<td>Professional Development (identifying training needs/record) (refer to Standard 8)</td>
<td></td>
</tr>
</tbody>
</table>

/continued overleaf….  

This Form must be copied to Supervisee
<table>
<thead>
<tr>
<th>Items Discussed</th>
<th>Action by Whom/Timescale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Support (Personal Issues, Leave etc) (refer to Standard 9)</td>
<td></td>
</tr>
<tr>
<td>Engagement (engaging and individual with the organisation – refer to Standard 10)</td>
<td></td>
</tr>
<tr>
<td>Other relevant issues might include:</td>
<td></td>
</tr>
<tr>
<td>Annual Leave:</td>
<td></td>
</tr>
<tr>
<td>T.O.I.L.:</td>
<td></td>
</tr>
<tr>
<td>Time-keeping:</td>
<td></td>
</tr>
<tr>
<td>Case Load/Work Load:</td>
<td></td>
</tr>
<tr>
<td>Team Work:</td>
<td></td>
</tr>
<tr>
<td>Satisfaction with Supervision:</td>
<td></td>
</tr>
<tr>
<td>Hours of Work:</td>
<td></td>
</tr>
<tr>
<td>Date of Next KSF Review:</td>
<td></td>
</tr>
<tr>
<td>Risk Management:</td>
<td></td>
</tr>
<tr>
<td>Sick Leave:</td>
<td></td>
</tr>
<tr>
<td>NISCC Registration:</td>
<td></td>
</tr>
<tr>
<td>Car Insurance and mileage claim:</td>
<td></td>
</tr>
</tbody>
</table>

Date of Next Supervision:  
Supervisee’s signature: ___________________________ Date: ________________  
Supervisor’s signature: ___________________________ Date: ________________
### CASE SUPERVISION RECORD

<table>
<thead>
<tr>
<th>Name of client:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Date:</td>
<td></td>
</tr>
</tbody>
</table>

**Discussion:**

- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]

**Decisions and actions agreed:**

- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]
- [ ]

**Supervisor:**

**Supervisee:**

**Supervision file:**

Copy to client file
3.4 Sample Supervision Agenda

**SUPERVISION AGENDA SAMPLE**

Staff Member: ________________________  
Date of Supervision: ____________________  

<table>
<thead>
<tr>
<th>CASE DISCUSSION/PROFESSIONAL DEVELOPMENT</th>
<th>PRIORITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Managed Cases</td>
<td></td>
</tr>
<tr>
<td>Level 11</td>
<td></td>
</tr>
<tr>
<td>Hospital Admission</td>
<td></td>
</tr>
<tr>
<td>Drafts/Closures</td>
<td></td>
</tr>
<tr>
<td>Bank Holiday List</td>
<td></td>
</tr>
<tr>
<td>Case Load Report for Audit</td>
<td></td>
</tr>
<tr>
<td>Home Help Issues</td>
<td></td>
</tr>
<tr>
<td>Training</td>
<td></td>
</tr>
<tr>
<td>Sick Leave</td>
<td></td>
</tr>
<tr>
<td>Annual Leave</td>
<td></td>
</tr>
<tr>
<td>I.C.S</td>
<td></td>
</tr>
<tr>
<td>Reviews</td>
<td></td>
</tr>
<tr>
<td>Carers Assessments</td>
<td></td>
</tr>
<tr>
<td>Direct Payments</td>
<td></td>
</tr>
<tr>
<td>Contact Details</td>
<td></td>
</tr>
<tr>
<td>A.O.B</td>
<td></td>
</tr>
<tr>
<td>Next Date</td>
<td></td>
</tr>
</tbody>
</table>

Final Version 21 January 2010
3.5 Case File Audit Sheet

This form should be used as a tool for first line managers for a random sampling of case files. It does not replace larger audit processes that the Trust may administer.

Service delivery area for audit……………………………..

Client Name: ........................................ File No: .....................

Address: ...........................................  Soscare No: ...............

Social Worker: ............................................

- Froning sheet on file and fully completed
- Referral form(s) on file
- Referral form(s) signed by Social Worker
- Referral form(s) dated by Social Worker
- Personal details all completed
- Evidence that previous history checked
- Referral categorised appropriately
- Referral signed and dated by Senior Social Worker
- SSW ratification and comments completed
- Assessment Documents dated and signed by the Social Worker and Senior Social Worker
- Planning Documents dated and signed by the Social Worker and Senior Social Worker

Yes  No
- Review Documents dated and signed by the Social Worker and Senior Social Worker
- Evidence that Direct Payments were considered
- Evidence that Carers Assessment was offered
- Daily records signed and dated and filed in order
- All records completed in a legible manner
- Evidence of decision making on file, e.g. case supervision/consultation or evidence of SSW auditing file
- Evidence of adherence to Policies and Procedures e.g. timescales, etc.
- Evidence that senior manager has made the decision to close cases where children were formerly on the Child Protection Register (ACPC Policies & Procedures Section 6.116 & 6.117)
  
  Evidence of adherence to Safeguarding of Vulnerable Adults Procedures
  Evidence of adherence to Child Protection Procedures

SSW Comments:

Signature of Person doing Audit: .................................................................
Date: ...........................................................................................................

Date discussed with Social Worker: .........................................................
Social Worker Signature: ...........................................................................

Copy: Client file
      Social Worker supervision record
### 3.6 Supervision Audit Tool

This tool is designed to assist managers to audit supervision (see standard 12) with a view to establishing whether supervision policy has been adhered to.

It is intended that this tool can generally be completed with reference to supervision notes recorded on the pro forma (appendix 2a) and placed on the supervision file. However, auditing of case-specific supervision records (appendix 2b) will present a fuller picture.

#### Standard 1 – Formal and regular supervision

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Partially</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has supervision been provided at the stipulated intervals?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Comment**

#### Standard 2 – Permitting proper reflection and discussion

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Partially</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was supervision postponed only in exceptional circumstances–and sessions reconvened asap?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Where the supervisor was absent long-term, were alternative arrangements made?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Comment**
Standard 3 – Written agreement

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>Partially</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was a written agreement drawn up within the stipulated timescale?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did the agreement address the stipulated issues?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has the agreement been reviewed as described in the agreement?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comment

Standard 4 – Planned and purposeful activity

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>Partially</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is there evidence that supervision was planned?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Were decisions made at the previous session reviewed?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comment

Standard 5 – Recording and storage

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>Partially</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Were all records made on the correct pro forma and signed within the stipulated timeframe?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do records demonstrate that issues of respect, diversity/ anti-discriminatory practice have been addressed?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are all records legible, signed and dated?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Comment

Standard 6 – Training

<table>
<thead>
<tr>
<th>Has the supervisor received training/refresher training in their role (as outlined in this standard)?</th>
<th>Yes</th>
<th>Partially</th>
<th>No</th>
</tr>
</thead>
</table>

Comment

Standard 7 – Management Function

<table>
<thead>
<tr>
<th>Has the workload been managed and work allocated as specified in the standard?</th>
<th>Yes</th>
<th>Partially</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has supervision ensured that case plans are devised, implemented, reviewed and recorded?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has supervision ensured that outcomes and risks are identified?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has supervision reviewed all new referrals, assessments, decisions and case closures?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comment
### Standard 8 – Professional Development Function

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Partially</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has supervision provided opportunities to staff to develop their skills, knowledge and competence?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have training needs and opportunities been identified?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has feedback on performance been provided?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comment

---

### Standard 9 – Support Function

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Partially</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is there evidence that the supervisee has received appropriate support?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comment

---

### Standard 10 – Engagement

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Partially</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has supervision enabled staff needs to be represented to management?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has supervision enabled negotiation of differences (within and outside of the agency)?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comment
### Standard 11 – Diversity/ anti-discriminatory practice

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>Partially</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has supervision promoted the integration of diversity principles into assessments, plans and interventions?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has supervision helped to identify specific vulnerabilities?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has discrimination been acknowledged and (in so far as this is possible) countered by service provision?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has supervision ensured respect for the dignity of service users and carers?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Comment**

______________

Signature ___________________________ Date __________________

---

**Equality**

This policy/proposal has been screened for equality implications as required by Section 75 and Schedule 9 of the Northern Ireland Act 1998, and it was found that there were no negative impacts on any grouping.

**Human Rights**

This policy has been considered under the terms of the Human Rights Act 1998 and was deemed compatible with the European Convention Rights contained within the Act.