Clinical supervision is a “reflective practice for practice” (Driscoll 1994). Sessions enable the practitioner to reflect on his/her practice, supervised by an identified facilitator. It is often seen as a nurse led movement within the health care setting, however all health care professionals should have clinical supervision and this includes Hospital Play Specialists.

Clinical supervision is important because it allows us to reflect on events and outcomes, enabling the individual to plan for the future. Training needs may be identified. As a result the individual feels supported, and that their professional development is being monitored.

Clinical supervision is not a performance management tool or a form of staff assessment, and as such is not hierarchical. Clinical supervision sessions are not personal counselling sessions.

Method

It is important that you attend training in clinical supervision. Clinical supervision can take place on an individual basis or within a group.

Contract

A contract should be drawn up between you and your supervisor. This should cover issues such as length and regularity of sessions, who will be responsible for the room booking, aims of the sessions, confidentiality, the documentation and evaluation of the sessions. This contract should be reviewed on a regular basis. Dates and times of sessions for a set period of time should then be agreed. If a supervision session has not taken place when planned, this should be recorded along with the reason. This should also be monitored.

Confidentiality is an important issue. Boundaries, which include situations in which information discussed in supervision can and should be disclosed elsewhere, should be set between the supervisor and the supervisee at the outset. If an example of gross misconduct has been disclosed by a supervisee, the supervisor must report this to his/her Line Manager.

Choosing a supervisor

It is recommended that a choice of supervisor be given to the supervisee and that this be reviewed on a regular basis. Supervisors must be trained and be receiving clinical supervision themselves. A number of options are open to the HPS:

- A HPS colleague
- A member of the multi disciplinary team who you feel has the relevant skills and/ or knowledge.
- Your line manager
- Someone from an outside agency e.g. social services (for reasons of confidentiality
this must be agreed by the Trust for whom you work)
• A HPS from a neighbouring hospital. Some hospitals have reciprocal arrangements where the senior HPS in each hospital acts as a clinical supervisor for the staff in the other hospital.

Content
Clinical supervision sessions should be used to discuss situations that arise at work. The focus of the sessions should be as follows:

Returning to the situation

What
• is the purpose of returning to the situation?
• exactly occurred, in your own words?
• did you see?
• did you do?
• was your reaction?
• did other people do? (e.g. colleagues, patients, visitors)
• do you see as key aspects of this situation?

Understanding the context
So what
• were your feelings at the time?
  • are you feeling now?
• were the effects of what you did/did not do?
• ‘good’ emerged from the situation?
• troubles you, if anything?
• were your experiences in comparison to your colleagues/patients?
• are the main reasons for feeling differently from your colleagues?

Modifying future outcomes
Now what
• are the implications for you, your colleagues, patients?
• needs to happen to alter the situation?
• are you going to do about the situation?
  • happens if you decide not to alter anything?
• might you do differently if faced with a similar situation in the future?
• information do you need to face a similar situation?
• are the best ways of getting further information about the situation?
• if it should arise again?

The Benefits of Clinical Supervision
Clinical Supervision benefits staff both on a personal and professional level. Staff feel valued and supported, which increases motivation, confidence and competence. Being given the opportunity to talk over professional issues will help to reduce stress levels amongst staff. Clinical supervision provides reassurance and an opportunity for staff to learn from their mistakes. It ensures that Best Practice Guidelines are followed and that Clinical Governance is adhered to. It is a valuable opportunity to monitor professional development and IPR objectives and outcomes, and to identify training needs.
References


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