

INTRODUCTORY SUPERVISOR WORKSHOPS (ISW)

8th and 9th March 2022

AIMS FOR THE MORNING

For participants to:

- Be aware of the structure and requirements of this training
- Complete elements of the portfolio
- Be aware of the context within which supervision is being delivered
- Be aware of the research base regarding the effectiveness of supervision
- Revision of models of supervision in the supervisor role

A Yorkshire and Humber Collaboration



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Some KEY POINTS

- 2+2 days
- Learning Outcomes
- Peer Supervision
- Supervision Practice and Supervised Practice
- All presentations will be found in various ways through the three different Universities (see participant pack)



PORTFOLIO REQUIREMENTS

Portfolio of Assignments

- Self Evaluation of Learning Outcomes Questionnaires (1 pre training and 1 post training)
- Goal Attainment Scaling Exercise
- Peer Supervision Contract (and commentary)
- Presentation of the Problem Based Learning Exercise

Portfolio of Assignments

- A reflective log containing 3 x 500 word personal accounts considering
 - An issue of equality, diversity and inclusion
 - The relevance of a theoretical model of supervision
 - An ethical aspect of supervisory practice

Portfolio of Assignments

- Structured feedback received from someone the participant has supervised during the course of the programme using
 - the Supervisory Relationship Questionnaire (SRQ) developed in Oxford,
 - the Short Form of the SRQ on a minimum of 6 occasions
 - the Leeds Alliance in Supervision Scale (LASS) on a minimum of 6 occasions
 - (plus commentary)

THE SUPERVISORY RELATIONSHIP QUESTIONNAIRE (SRQ)
 Developed by Marina Palomo (supervised by Helen Beinart)
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The following statements describe some of the ways a person may feel about his/her supervisor.

To what extent do you agree or disagree with each of the following statements about your relationship with your supervisor? Please tick the column which matches your opinion most closely.

	Strongly Disagree	Disagree	Slightly Disagree	Neither Agree nor Disagree	Slightly Agree	Agree	Strongly Agree
SAFE BASE SUBSCALE							
1. My Supervisor was respectful of my views and ideas							
2. My supervisor and I were equal partners in supervision							
3. My supervisor had a collaborative approach in supervision							
4. I felt safe in my supervision sessions							
5. My supervisor was non-judgemental in supervision							
6. My supervisor treated me with respect							
7. My supervisor was open-minded in supervision							
8. Feedback on my performance from my supervisor felt like criticism							
9. The advice I received from my supervisor was prescriptive rather than collaborative							
10. I felt able to discuss my concerns with my supervisor openly							
11. Supervision felt like an exchange of ideas							
12. My supervisor gave feedback in a way that felt safe							
13. My supervisor treated me like an adult							
14. I was able to be open with my supervisor							
15. I felt if I discussed my feelings openly with my supervisor, I would be negatively evaluated							
STRUCTURE SUBSCALE							
16. My supervision sessions took place regularly							
17. Supervision sessions were structured							
18. My supervisor made sure that our supervision sessions were kept free from interruptions							
19. Supervision sessions were regularly cut short by my supervisor							
20. Supervision sessions were focused							
21. My supervision sessions were disorganised							
22. My supervision sessions were arranged in advance							
23. My supervisor and I both drew up an agenda for supervision together							
COMMITMENT SUBSCALE							
24. My supervisor was enthusiastic about supervising me							

Portfolio of Assignments

- Feedback from your supervisor of supervision, after Day 2 and after Day 4. This must include direct observation (live or recorded delivery of your supervision)

- Baseline measures:

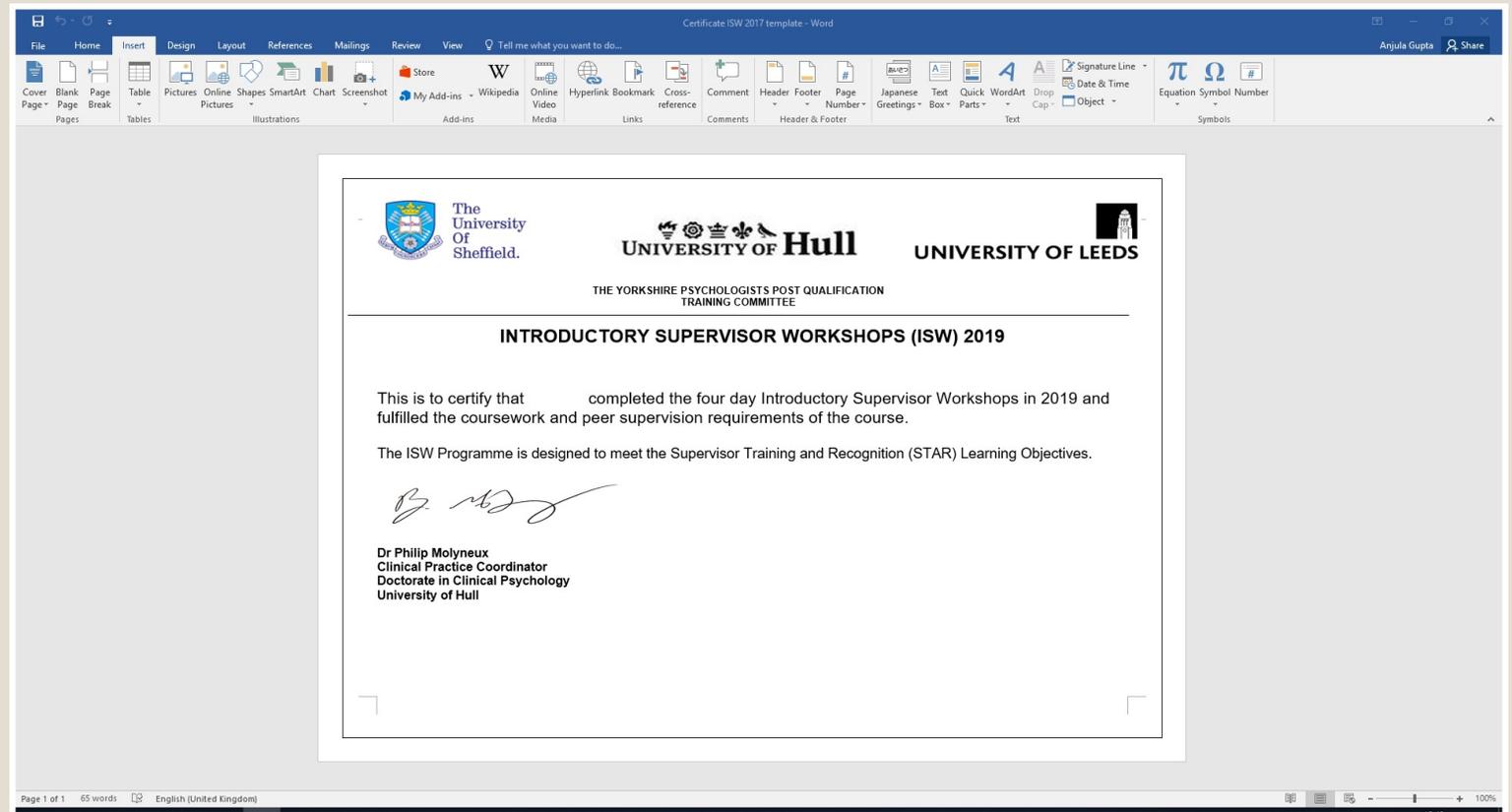
Self evaluation of learning outcomes

GAS

Review of Portfolio by course

Portfolio submitted by the end of the Year

Certificate issued for CPD records



THE CONTEXT OF SUPERVISION

The needs/expectations of:

- - Research
- - National
- - the Training Institution
- - the Team/Organisation
- - the Supervisor
- - the Supervisee
- - the Service user

Research

- Variety of evaluation tools used in studies- self completion, semi structured interviews, focus groups, Delphi technique etc
- RCTs very scarce.
- What outcomes to measure and how to measure them
- Bulk of studies focus on quality and outcome of the supervision relationship and its focus
- A review of the the efficacy of supervision (not satisfaction with supervision) was conducted by Watkins in 2011
- This paper built on previous reviews e.g Ellis and Ladany, (1997) & Freitas (2002), Wheeler and Richards (2007).

Hot of the press...

- Unpublished work by Iain O'Leary (2021)
- - A systematic review 'Exploring the relationship between clinical supervision and client outcomes'
- - Building on the 2011 review, 12 studies were included
- - Overall the studies were of poor quality with a lack of reporting around various elements including the design of the study and the demographics of the people studied, including ethnicity
- One credible study (Bambling et al., 2006). This study found a significant impact of supervision on the outcomes for those working with people with major depression
- The review *'reinforces the broader challenges in trying to comprehend the links between supervision and therapeutic outcomes'*

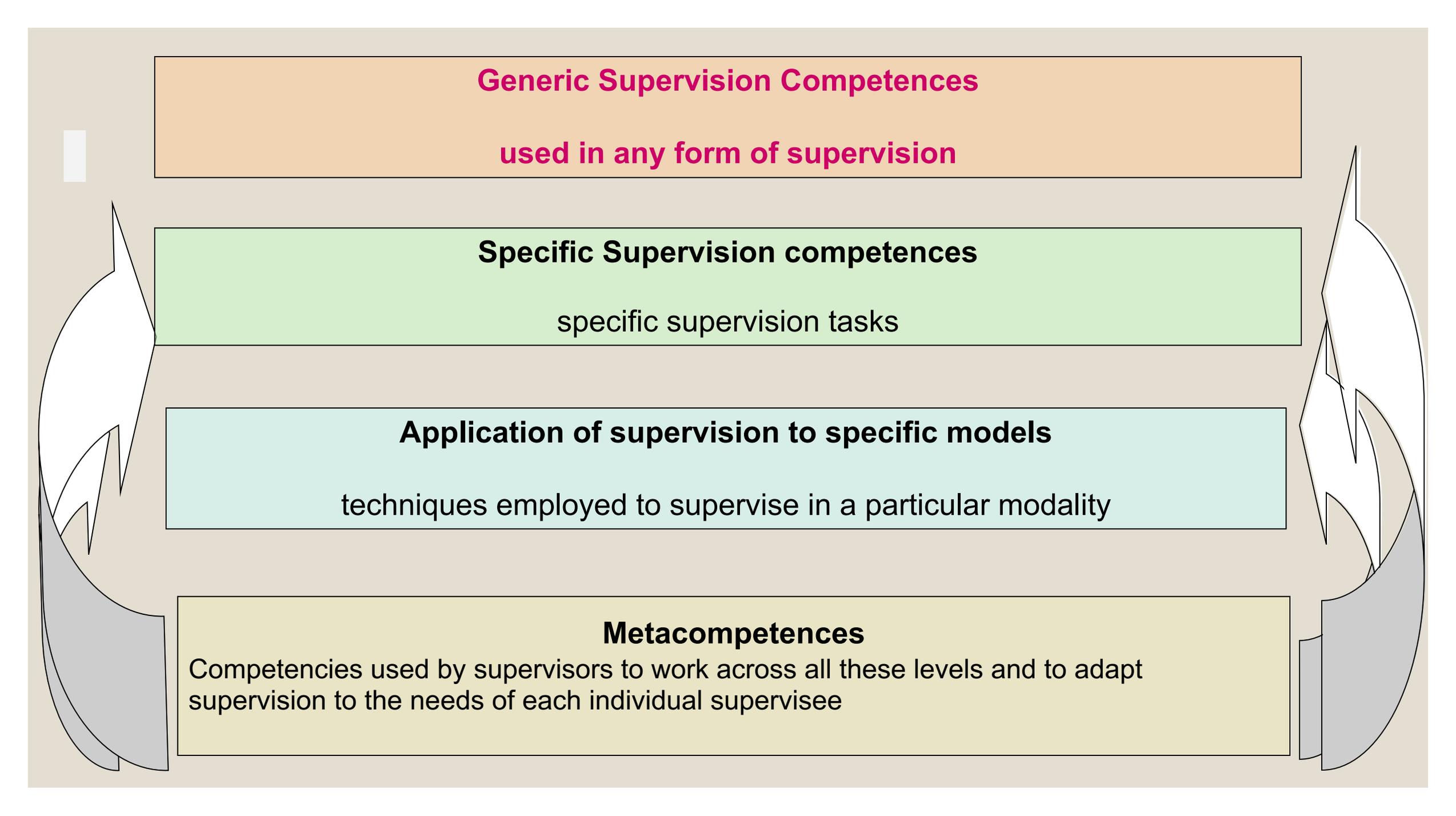
The National Context



- DROSS/STAR/CSAG
- BPS and CPD
- Health and Care Professions Council standards of proficiency
- BPS accreditation criteria
 - Trainees must 'develop skills in the provision of supervision'
- BPS Guidelines for Clinical Supervision (2010)
- Agenda for Change
- IAPT

SUPERVISION COMPETENCIES

- An IAPT supervision expert reference group was established in February 2008
- This group was multi-disciplinary and aimed to devise a competency framework for supervision
- These comprise of:
 - - Generic supervision competencies
 - - Specific supervision competencies
 - - Applications of supervision to specific models/contexts
 - - Metacompetencies
- - <https://www.ucl.ac.uk/pals/research/clinical-educational-and-health-psychology/research-groups/core/competence-frameworks-8>



Generic Supervision Competences

used in any form of supervision

Specific Supervision competences

specific supervision tasks

Application of supervision to specific models

techniques employed to supervise in a particular modality

Metacompetences

Competencies used by supervisors to work across all these levels and to adapt supervision to the needs of each individual supervisee

BPS GUIDELINES 2010

- A very helpful (and brief) paper
- Selected highlights:
 - - who can supervise: doesn't always have to be a CP but quality needs to be maintained
 - - aims of the placement should be agreed within the first two weeks
 - - the supervisor should plan an induction for the trainee
 - - trainee needs shared office space, telephone and a desk, plus secretarial and IT support

BPS Guidelines (cont'd)

- - supervisors have clinical and legal responsibility for their trainees
- - supervision must be at least 1 hour (1 1/2!) per week with total contact time of 3 hours
- - trainees and supervisors must observe each other at work
- - there are mechanisms for monitoring the placement and for dealing with potential failed placements

<https://www.bps.org.uk/sites/bps.org.uk/files/Accreditation/Guidelines%20o%20clinical%20supervision.pdf>

Local Registers

- The three programmes keep their own registers as a quality assurance process.
- Information held on these varies between programmes but may include:
 - Dates of introductory training
 - HCPC registration
 - Supervision-related CPD
 - Information about preferred models of working
 - Dates of placement provision

Team/ organisational context

- Local service guidance
- Context to the work
- Culture of supervisory practice

Supervisor and supervisee

- Skills
- Style
- Personal characteristics (Social GGRRAAACCCEESSS)
- Preferences
- Previous experiences
- Expectations
- Responsibilities

Service user

- How does supervision benefit the service user/ client/ patient?

Your supervisory context

Talk together in small groups to consider the following questions:

- What is the reality of supervision in your service?
- What are the important considerations for you when thinking about being a supervisor? (eg what are the barriers, what might facilitate, what is the local context)