

Clinical Supervision in Radiography

https://www.sor.org/learning/document-library/professionalsupervision-advice-and-guidance-document

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Clinical Supervision is:

https://www.sor.org/learning/document-library/professionalsupervision-advice-and-guidance-document

A formal/informal arrangement that enables a practitioner to discuss his or her own work performance in a safe environment with someone who is more experienced (DHSSNI, 2013)

A method to improve professional self through lifelong learning, improve professional practice and to feel, and be supported as a member of staff (NHS Lanarkshire, 2010).

Professional Supervision is integral to sound clinical governance and should be considered a normal part of working practice, (SCoR, 2013)

Has been around in nursing for a while – SCoR ECF,2010 – "use and give professional supervision".

Francis Report (2013) – lack of supervision raised!



Terminology



- Supervision
- Mentorship an encouraging relationship (a peer)
- Appraisal make judgements on quality of a practitioner's work
- Assessment evaluate performance and attainment of a learner
- Preceptorship allows newly qualified radiographer practitioners to consolidate knowledge and transition from student to novice practitioner



What does the HCPC say....

- Clinical Supervision supports and improves registrants practice
- Ensure AHPs "practice safely and effectively while maintaining high professional standards of professional conduct"
- Approaches and practice of Clinical Supervision vary widely across the professions they regulate
- They do not produce specific standards or guidance on this.
- But they do say that good quality supervision is a supportive structure to enable registrants to meet their CPD standards



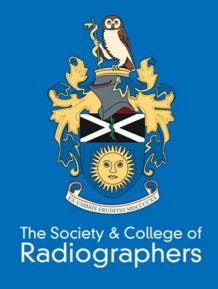
"Preventing small problems from becoming big problems in health and care" (HCPC, 2015)

The HCPC publication highlights poor or infrequent supervision as a potential trigger for disengagement (caused by workload pressures / professional isolation).

Ways to prevent problems:

- good supervision;
- regular appraisal and performance management;
- buddying schemes;
- mentoring;
- preceptorship;
- professional networks;
- reflective practice





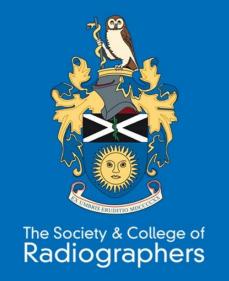
NHS Scotland

Scotland's Position Statement on Supervision for Allied Health Professions (2018)

https://www.nhsggc.org.uk/media/252862/ahp-supervision-statement-sept-18.pdf

Co-authored by: NES; AHP Federation Scotland & AHP Directors (Scotland)

TURAS Platform - https://learn.nes.nhs.scot/3580/clinical-supervision



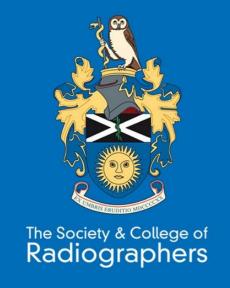
Clinical Supervision: (2018)

ls:

- The development of knowledge, skills, values and practice
- A <u>safe</u> place for professional development, growth and questioning, challenge, affirmation and structured reflection.
- Reflective practice and clinical reasoning taking account of professional standards and legislative context

Is not:

- Psychotherapy, therapy or counseling.
- An opportunity to 'police' staff and check up on their actions.
- Dictated by hierarchical relationships and positions
- Controlled, managed and delivered by the supervisor and / or manager.
- A place for blame, gossiping or moaning.
- A place for judgement on practice.



Agree?



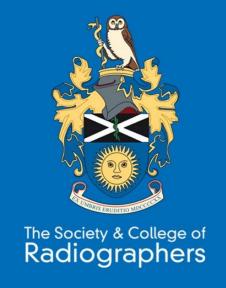
Clinical Supervision should provide a supportive, good listening environment and should be a safe environment for individuals to discuss areas where additional support is required.

Clinical Supervision can also be integrated into a CPD programme

Other AHP disciplines use case reviews – does this suit radiography?

A good idea!!!

On-line training already available at TURAS – Unit 1 for all; Units 2-4 for Supervisors.



Models of Supervision

Restorative/Supportive
Focus on health and well
being - supportive help
for professionals
working constantly with
stress and distress

Normative/ Managerial Focus on ongoing monitoring and evaluation, the quality control aspects of professional practice

> Formative /Educative Focus on development of knowledge and skills

Procter's Model of Clinical Supervision

http://www.knowledge.s cot.nhs.uk



Frequency & Method of Supervision

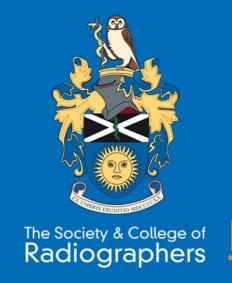
See TURAS Learn at https://learn.nes.nhs.scot/3580/clinical-the Society & College of Radiographers
supervision

The *frequency* of supervision will depend on:

- the experience of the supervisee
- their length of service
- the nature and complexity of their work
- the individual's support needs

Method: - Responsibilities clear

- one-to-one discussions
- Group supervision
- Team supervision



Importance of Feedback:

Good training for supervision on TURAS – see https://learn.nes.nhs.scot/3580/clinical-supervision

Good feedback:

- Improves performance
- Increases morale
- Facilitates self-reflection
- Develops teamwork
- Enhances quality of service

Lack of good feedback:

- Demoralises
- Reduces confidence
- Results in conflict
- Reduces opportunities for learning



Opportunities within Radiography

- NES Flying Start (also NES Effective Practitioner)
- Skills development as part of career progression
- Team (modality) meetings
- Educational presentations
- Peer Support including medical support
- Network Support



Issues to face:

- Supervision works well during preceptorship
- Implementation from a manager is challenging
- Protected time for an entire dept. is difficult

Do the radiography workforce "just deal" with demand and not ask for this?

Workforce modelling reviews must include supervision time, CPD etc

SoR ULRs training focus on "mentoring" A SCoR webinar on supervision / mentoring coming soon.

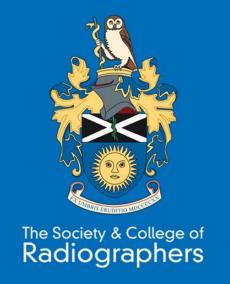
MM to convene a SCoR Scottish Group to write guidance.



Implementing Clinical supervision

- Discuss with peers and management to set an informal agreement on the idea of implementing clinical supervision
- ? Have a local clinical supervision facilitator (a CoR practice educator)
- ? Have a clinical supervision implementation working group with a range of different grades (a bottom up approach)
- Allow frank discussion barriers / enablers
- Management commitment essential
- Training YES





DynamicsSupervisee Supervisor

Band 5 / 6 ----- Band 7

Band 5 Band 6

Band 7 Section managers / modality leads

Clinical specialists Peer Review

HOD outside manager / other AHP



Sessions – Led by the Supervisee

- Away from main service area
- Planned into workload
- Responsibilities clear Contract
- Ground rules
- Presentation of clinical issue (confidentiality)
- Reflective practice
- Critical incident analysis
- Discussion / feedback
- Action plan
- Record / document outcomes
- Speak with your local NES PEF





The importance and benefits of CPD and lifelong learning

- Increases satisfaction with services
- Contributes to up-to-date and evidence-based services
- Influences service development
- Improves the quality of service delivery
- Supports recruitment, keeping staff, and creating a flexible

workforce

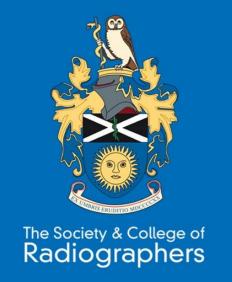
- Adds to the mix of skills and productivity of staff
- Improves performance

Principles for continuing professional development and lifelong learning in health and social care

Prepared by:

The Interprofessional CPD and Lifelong Learning UK Working Group

January 2019

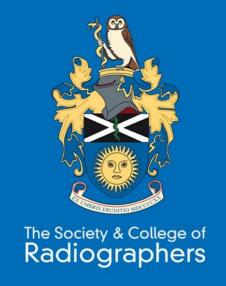


HCPC CPD standards

https://www.hcpc-uk.org/standards/standards-of-continuingprofessional-development/

Our standards for CPD say that a registrant must:

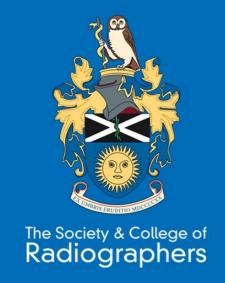
- maintain a continuous, up-to-date and accurate record of their CPD activities;
- 2. demonstrate that their CPD activities are a mixture of learning activities relevant to current or future practice;
- 3. seek to ensure that their CPD has contributed to the quality of their practice and service delivery
- 4. seek to ensure that their CPD benefits the service user;
- upon request, present a written profile (which must be their own work and supported by evidence) explaining how they have met the standards for CPD.



Meeting HCPC Standards

To meet the CPD standards, you need to:

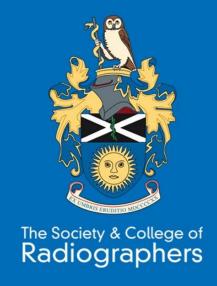
- Carry out learning activities on a regular basis
- Carry out different kinds of learning activities.
- Keep a record in the way that is most convenient for you.
- Carry out activities that might improve your practice and benefit your service users.
- Take part in an audit if asked.



HCPC audit stuff

- Randomly select 2.5 per cent of each profession and ask them to submit their CPD profile. December.
- If you are selected for CPD audit pay the registration fee
- Submit a CPD profile by deadline (28th Feb) shows activities you have undertaken since your last renewal
- Provide <u>supporting evidence</u> that shows your CPD meets the standards, including a <u>dated list</u> to help the assessors identify any gaps of more than three consecutive months

https://www.hcpc-uk.org/cpd/cpd-audits/completing-a-cpd-profile/how-to-complete-your-cpd-profile/cpd-sample-profiles



Useful websites:

http://www.knowledge.scot.nhs.uk/nmahpsupervision/participation/models-of-supervision/theoretical-models.aspx

http://www.knowledge.scot.nhs.uk/home.aspx

http://www.effectivepractitioner.nes.scot.nhs.uk/Default.aspx

http://www.careerframework.nes.scot.nhs.uk/

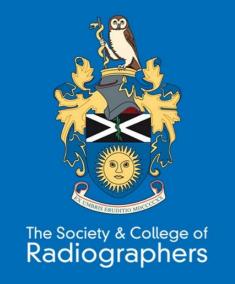
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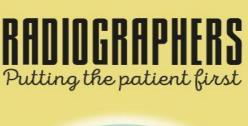
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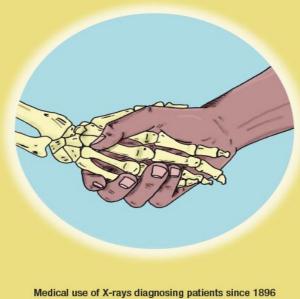
https://www.nes.scot.nhs.uk/education-and-training/by-discipline/allied-health-professions/ahp-professional-portfolio.aspx

https://www.nes.scot.nhs.uk/education-and-training/by-theme-initiative/workforce-development/effective-practitioner.aspx

https://www.health-ni.gov.uk/sites/default/files/publications/dhssps/regional-supervision-policy-ahp-2014.pdf





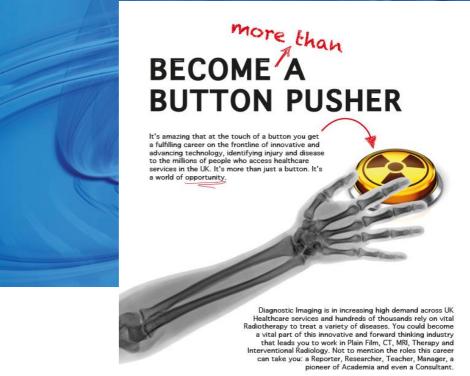


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And apply your knowledge to help these?

We need the brightest and best young minds to join our profession!

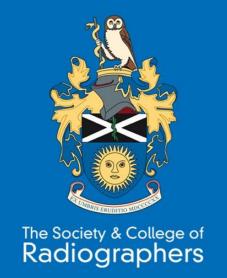
Do you want to develop your interest and knowledge in science within a practical, people-centred profession?

If so, Radiography could be for you!

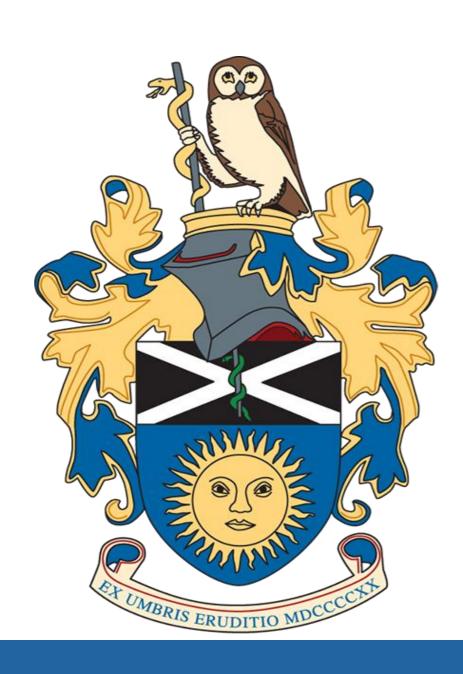


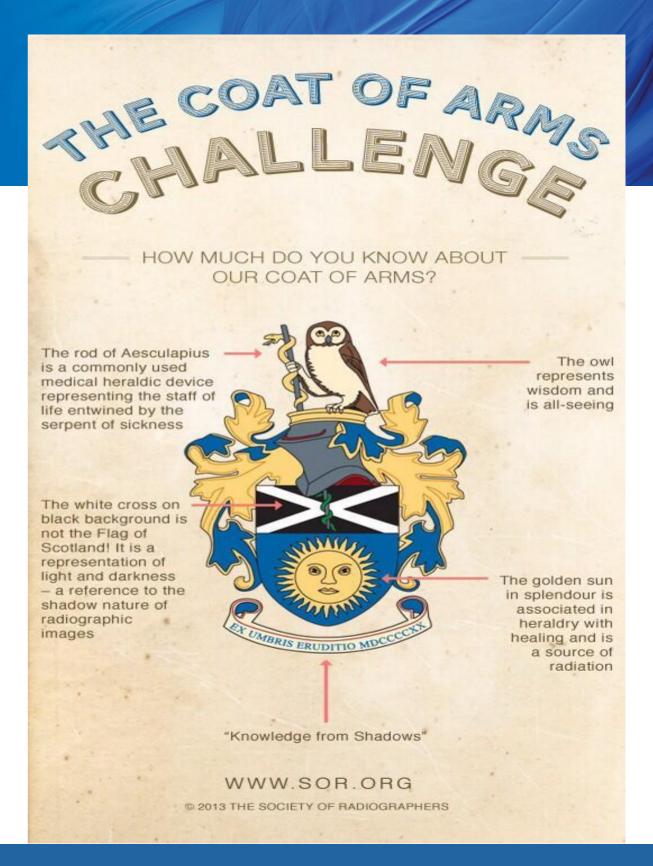


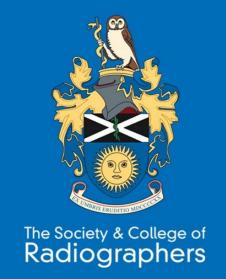
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Questions and further information?



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Thank you

