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Summary

This document is provided for the support and development of the professional workforce in diagnostic imaging and radiotherapy through professional supervision. It replaces both the SCoR Clinical Supervision Framework and Position Statement (2003) and offers advice and guidance about the process and conduct of professional supervision and how to embed it in the professional practice of imaging and radiotherapy in all settings. Professional supervision is not the same as the direct, clinical supervision of students and learners by mentors and practice educators, or the line management of staff.

1. Purpose

This document is intended for the support and development of the professional workforce in diagnostic imaging and radiotherapy. It replaces both the SCoR Clinical Supervision Framework and Position Statement (2003). Its purpose is to offer advice and guidance about the process and conduct of professional supervision and how to embed it in the professional practice of imaging and radiotherapy in all settings.

Professional supervision is integral to sound clinical governance and should be considered a normal part of working practice; necessary to support autonomy and practitioner development. When effectively implemented, it enhances professional practice and improves the quality of the service offered to patients and carers. The benefits of professional supervision for patient care and practitioners are identified, in particular, the opportunity for safe, non-judgemental professional development associated with maintaining and developing the individual's **excellence** and **independence in a particular role**. ¹

The document contains information about the key factors to be considered when setting up rigorous systems of professional supervision and should be helpful to leaders and managers of services in enabling them to identify resource requirements. It is not intended to be prescriptive about how professional supervision should be managed in individual services; rather, it sets out the principles, a framework for the conduct of supervision sessions and offers some examples of supervision topics to show how practitioners can get the best from it.

2. Role of the SCoR

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The Society and College of Radiographers gives professional leadership, guides and supports professional development and offers accreditation to those who meet its standards. In offering advice and guidance for the implementation of systems of professional supervision, this document is consonant with

- the outcome for all practitioners in the Education and Career Framework, ² 'Use and give professional supervision',
- standard 2.3 of the Code of Professional Conduct, 'You must monitor the quality of your practice through reflective practice, using evidence from audit and research',
- actions for individuals when defining their scope of professional practice,⁴
- recommendations of the Francis Report⁵ in relation to the maintenance of practitioner competence,
- continuing professional development requirements of the Health and Care Professions Council.

3. Definitions

Professional supervision is a formalised means of improving and monitoring practice through dialogue with another skilled, experienced practitioner, peer or senior where the content of supervision sessions is led by the supervisee. It is complementary to, but does not replace, formal systems of appraisal and performance management.

Professional supervision has been defined as 'a formal process of professional support and learning, which enables individuals to develop knowledge and competence, assume responsibility for their own practice and enhance consumer protection and safety of care in complex situations.'

'Supervision is the process of reflecting on the practice issues that arise in the course of everyday work. It can help practitioners do their job more effectively by developing their capacity to use their experiences to rethink their practice and take action.' §

4. Place of Professional Supervision in Career and Professional Development

Professional supervision should be offered to the professional workforce in imaging and radiotherapy as part of their on-going professional development. Figure 1 shows its place in learning and support for career and professional development.

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5. Approaches to Professional Supervision

Professional supervision is a flexible concept and its introduction into imaging and radiotherapy services should take account of the context and be tailored to the needs of patients and practitioners. For example, there are different modes of supervision; one-to-one, group, peer or hierarchical. It does not have to be given by a member of the same profession but can be delivered across professions and across multi-disciplinary teams as is the case among many health and social care professional groups.

6. Theoretical Framework for Professional Supervision

The theoretical framework intended to underpin the concept of professional supervision has 3 interactive functions:⁹

- Formative Education and professional development enabling the practitioner to increase knowledge, skills and understanding of both clinical problems and self
- Normative Administration and quality assurance enabling testing of practice against professional codes of conduct and service protocols, ensuring patient safety and improving practice
- Restorative Supporting and assisting with coping supporting practitioners, helping to identify solutions to problems and alleviate stress.

7. Principles

The key principles guiding any system of professional supervision are that it should

- support and enhance practice for the benefit of patients,
- involve a competent supervisor and practitioner or group of practitioners reflecting on and critically evaluating practice,
- be planned, systematic and conducted within agreed boundaries,
- be led by the supervisee(s),
- facilitate clear, unambiguous communication and be conducted in a positive, respectful manner.
- be non-judgemental and blame-free,
- be explicit about the public and confidential elements of the process,
- · record outcomes and agree actions,

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- remain distinct from formal line management supervision and appraisal,
- be audited.

8. Creating an effective model

When setting up a system of professional supervision, leaders and managers will need to decide what model will work for their service. In developing a model and associated business case, they should take account of the following factors:

8.1 Staff involved

All professional practitioners that have direct contact with patients should have the opportunity for professional supervision. Service leaders and managers will need to ensure that they have access to an appropriate means of support for themselves, such as mentoring or coaching.

8.2 Mode of supervision

This may be one-to-one or group, depending on appropriateness, preference and available resources.

8.3 Frequency of supervision sessions

Sessions should be regular and programmed into the working day. Monthly sessions are generally appropriate.

8.4 Where sessions will take place

A venue should be identified where privacy can be assured. This should be away from the main service area and free from interruptions.

8.5 Impact on workload

Professional supervision should be seen as integral to effective professional practice and therefore sessions need to be planned into the workload. The frequency, timing and numbers of staff involved will impact on workload and this will need to be calculated.

8.6 Training needs

Supervisors will require initial training in the model being used, basic counselling skills and giving constructive feedback. This may already be available within the service environment.

8.7 Implementation process

When planning implementation, it is often helpful to use a cascade model that begins with more senior staff and is subject to a continuous process of monitoring and evaluation.

8.8 Developing documentation

Contracts and record sheets will be required. Samples of these are given in the accompanying 'Links and Resources' document.

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8.9 Who will supervise?

Not everyone will want or be able to give effective supervision. Individuals should ideally be volunteers and have the attributes necessary to support the professional development of others. A person specification can be found in the 'Links and Resources' document.

8.10 Winning hearts and minds

Realising the benefits of professional supervision will take time and effort. They tend to become obvious after staff have been engaging with it for a period of time. The identification of a champion and staff participation in the development of the system is crucial to success. As with all change management, it is usually best to begin with the enthusiasts.

9. Responsibilities of supervisors and supervisees

The relationship between the supervisor and supervisee is important and it is recommended that supervisees are consulted about the choice of supervisor. Supervisors should ensure that there is a balance between support and challenge for supervisees within the session. They should engage in professional supervision themselves and have received appropriate training for the role.

9.1 Supervisors' responsibilities include

- negotiating and agreeing a supervisory contract that identifies the professional boundaries (ie what may and may not be discussed),
- establishing ground rules and a safe environment for sessions to take place,
- agreeing with supervisee dates, times, venues and agendas,
- ensuring the supervisee has access to supporting paperwork,
- helping the supervisee to explore and clarify thoughts and feelings,
- giving constructive feedback.

9.2 Supervisees' responsibilities include

- negotiating and agreeing a supervisory contract that identifies the professional boundaries (ie what may or may not be discussed),
- making a commitment to attend, preparing for and actively participating in supervision sessions.
- bringing topics, cases and issues to reflect on and discuss,
- being open to constructive feedback.

10. Limits to Confidentiality in Professional Supervision

Both the supervisor and supervisee have a responsibility to abide by their professional codes of conduct and registration body standards. It is implicit in the supervisory contract that, where there are any concerns that standards are not being maintained or the law is being contravened, this must be reported outside of the supervision session.

11. Audit and Evaluation

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An established system of professional supervision should be audited on an annual basis. It is good practice to present the evaluation report to management with outcomes cascaded to staff.

Possible audit key performance indicators (KPIs) are:

- safer clinical practice,
- improved patient satisfaction;,
- reduced adverse incidents and complaints,
- greater staff awareness of accountability;
- better targeting of professional and educational development,
- increased innovation.
- improved reflective skills,
- reduced staff sickness,
- improved staff retention,
- enhanced input into management appraisal systems.

It is also essential to evaluate the process, including planning, implementation, evaluation systems and documentation. All those involved in the professional supervision process should complete an evaluation tool to assess its impact on the individual.

Professional Supervision - Links and Resources

The College of Radiographers gratefully acknowledges the assistance of the British Dietetic Association and the College of Occupational Therapists in the compilation of this advice and guidance document for professional supervision.

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