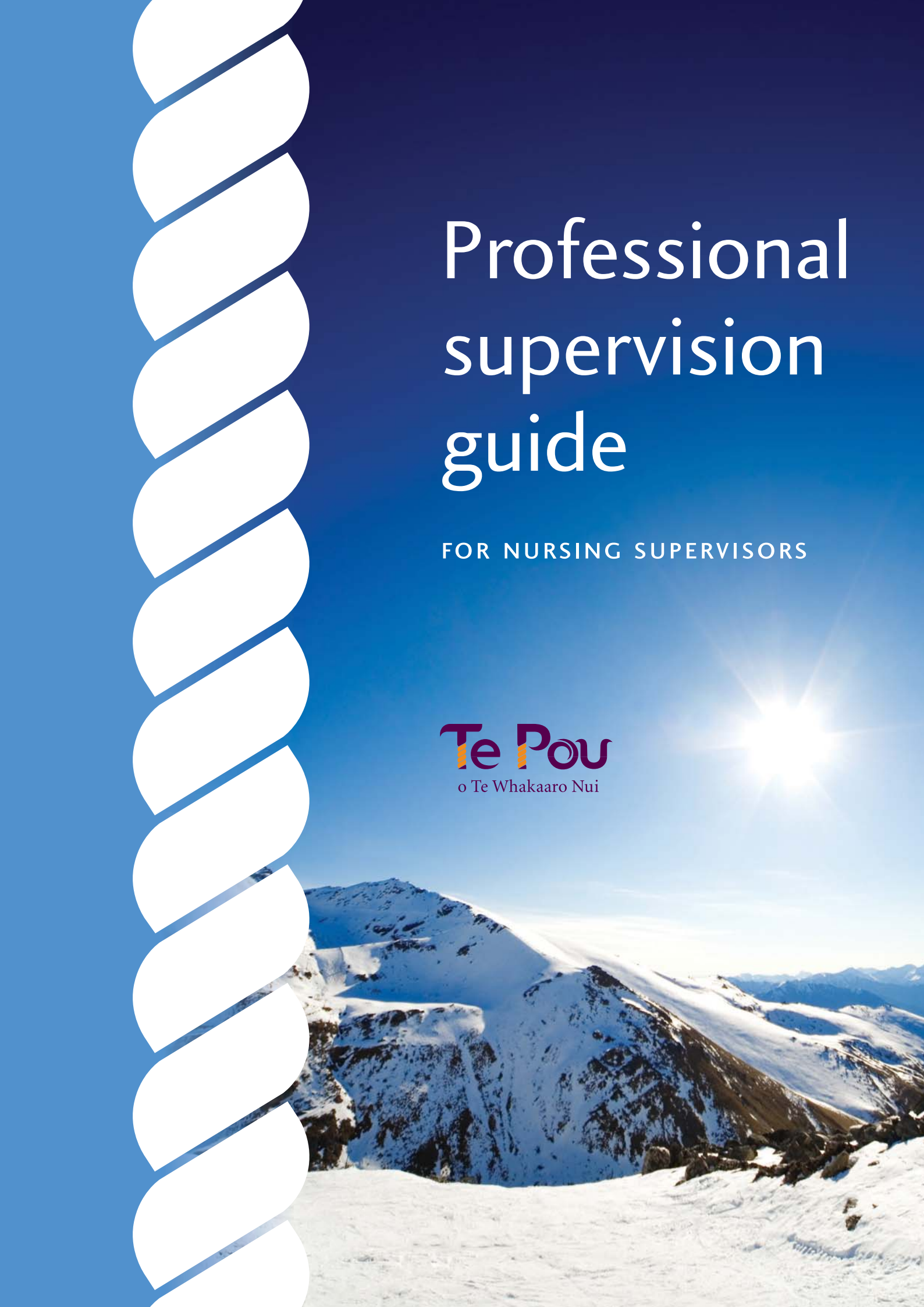


Professional supervision guide

FOR NURSING SUPERVISORS

Te Pou
o Te Whakaaro Nui





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Overview

Nau te raurau

Naku te raurau

Ka ki te kete.

With your input

And my input

The basket will be full.

Professional supervision is essential for clinicians who work within the mental health and addiction area. It allows space and time to reflect on practice, professional identity and to develop a wider view of the area that clinicians work in. It allows for the 'extra' vision, the wider view, that can occur when engaged with a professional supervisor, and reflecting on one's work.

Professional supervision is a key enabler for *Let's get real* (2008), a significant quality initiative for mental health and addiction services. *Let's get real* is a Ministry of Health framework that defines the essential knowledge, skills and attitudes needed to deliver effective mental health and addiction services. Professional supervision helps mental health and addiction nurses embed an approach directly into their daily practice that is centred on service users.

Furthermore, in accordance with the Health Practitioners Competence Assurance Act 2003 mental health nurses are required to demonstrate that they are 'competent and fit' to practise and professional supervision is an integral part of this.

Three guides have been produced in this series. All guides are available on the [Te Pou website](#).

- This Guide for Nursing Supervisors is designed for more experienced mental health nurses who are either new to the role of supervisor, or are already supervisors but want a more technical understanding of their roles and responsibilities. This guide should be used to enhance supervision training.
- The Guide for Nursing Supervisees is designed for nurses who are new to supervision. It outlines key issues to be aware of when beginning your professional supervision relationship and how to participate in professional supervision. It identifies the different kinds of supervision. This guide may be useful to read before a training module.
- The Guide for Nursing Leaders and Managers helps leaders and managers implement professional supervision from an organisational perspective. It defines the responsibilities of the organisation and how professional supervision can be implemented within an organisation.

All three guides are designed to assist with understanding and implementing the National Guidelines for the Professional Supervision of Mental Health Nurses in district health boards (DHBs), primary health organisations (PHOs) and non-governmental organisations (NGOs).

The National Guidelines for the Professional Supervision of Mental Health and Addiction Nurses are available on the [Te Pou website](#).

Anne McDonald, clinical project lead – nursing, Te Pou



Guide and *Let's get real*

Let's get real: Real Skills for people working in mental health and addiction (Ministry of Health, 2008) is a framework that describes the essential knowledge, skills and attitudes required to deliver effective mental health and addiction treatment services. *Let's get real* does not replace professional competency frameworks; rather it complements them by having a specific focus on the essential skills and attitudes required for all people working in mental health and addiction services.

Professional supervision gives mental health and addiction nurses the opportunity to embed the service user centred approach of *Let's get real* directly into their daily practice. Through contributing directly to service users' outcomes, supervision can be a vehicle that brings about positive change.

Guide design and development

We would like to acknowledge that this resource for the mental health and addiction nursing sector was developed with the involvement of key people and organisations in the sector.

Te Pou formed a project group to develop a process of professional advice and review. Contractor and registered psychologist Beverley Burns created the concepts for the content for this guide, and facilitated a workshop with key nurses, who were identified as professional supervision champions by the National Directors of Mental Health Nurses.

The combined work – from the key project group, champions group and specific expert knowledge from Beverley – has created finished products we believe will make a significant contribution to professional supervision.

We would like to particularly acknowledge Beverley for her hard work, commitment, expertise and genuine desire to produce a guide that will enhance the implementation of the National Guidelines for the Professional Supervision of Mental Health and Addiction Nurses in New Zealand.



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Note: All DHBs were invited to provide representatives. Those DHBs that were not in a position to provide a representative at this time acknowledged that professional supervision is a priority area for them.





Testimonial: The value of professional supervision

Claire Moore SERVICE USER AND TEAM LEADER

Supervision makes a huge difference to the quality of service provided by mental health clinicians, declares service user Claire Moore, team leader of Partnership-Evaluation-Recovery (PER) at Counties Manukau District Health Board (DHB).

As team leader of a unique consumer evaluation team, Claire's current role focuses on service development and quality improvements across clinical mental health services at Counties Manukau. Her role places her in a unique position to gain insight into what works well for all stakeholders; clients, families, other agencies and particularly clinical staff, and she is a strong advocate for professional supervision.

In Claire's experience, clinicians who undertake regular supervision are better supported in their roles to be more reflective, which can lead them to be more considered and less judgmental.

“Good professional supervision is an activity where a clinician has to take some accountability for the way they have been working. Good supervision may challenge beliefs about stigma and discrimination associated with mental illness, and may assist the staff to think outside the square in relation to the care of some clients.

“Becoming more creative in the care of clients may remove some barriers to recovery. Mental health staff

have great opportunities to make a real difference in people's lives and good supervision can assist in this process.”

The quality of the supervision also plays an important part in reducing or removing barriers within the service, adds Claire.

“Good professional supervisors will challenge whether clinicians are working in a recovery focused way, especially if *Let's Get Real* is embedded as key elements of the supervision session. Good supervisors will also focus on identifying a clinician's strengths and needs and provide developmental learning and modelling around the way the mental health service expects them to work with the clients. This is all beneficial for clients,” says Claire.

She also notices that a work environment providing regular supervision is more likely to be perceived by clinicians as an environment that is supportive of their professional development and understands their workplace environment.

Claire herself receives supervision from a nurse educator, with a mental health nursing background, and has found her supervisor's knowledge of the functions of clinical mental health services incredibly helpful. Her supervisor also provides a different insight into the perspective of clinical staff.

“This enables me to have greater understanding regarding the people and the organisation that I endeavour to influence to achieve better outcomes for the clients.”

Claire feels clinicians could also gain a lot from professional supervisors with service user backgrounds.

“It would help clinicians gain more understanding of the service user perspective; just as having a supervisor with a mental health nurse background has helped me to understand the clinical perspective.”

Claire only started having supervision herself four years ago because group supervision was already embedded in her consumer evaluation position when she came to work at Counties Manukau District Health Board. She found the first session a nerve-racking experience because she wasn't sure how her work experiences would be perceived by the supervisor.

“I soon came to realise there was a lot of support for the way that I experience my work environment through my supervisor and the process of supervision.”

The fact that supervision was available to her also proved a strong level of support from the DHB for her position, she adds.

Supervision is something she now encourages for everyone working in mental health, including the two members in her team who have regular group supervision.

“I choose to have both individual and group supervision. I also have a choice about who supervises me and that is great. I have mentors too – it all helps.”



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1. Profile: Introducing Sara Rosier, clinical nurse specialist

Sara Rosier PROFESSIONAL SUPERVISOR

There is nothing more satisfying than observing an ‘aha’ moment during a supervision session, says Mason Clinic forensic community team manager Sara Rosier, who has been providing supervision for the past three years. Professional supervision that is!

Before doing a professional supervision workshop at the University of Auckland in 2008, Sara thought she did a fine job ‘supervising’ staff as a manager but didn’t really understand ‘professional supervision’ and its role.

“Before I undertook training I felt I knew everything and supervision was simply about allowing staff to talk, while I nodded and made suggestions. I could not have been more wrong. What I was doing was line management, not supervision. They are two very different skill sets although they overlap in some areas.”

With a Postgraduate Diploma in Professional Supervision under her belt, Sara now sees things very differently. She describes supervision as a place where the supervisor and supervisee – in confidence – look at relationships and practice, and how relationships and problems impact on practice.

Supervision is also quite different from offloading onto a mate or colleague.

“It is not a chat, nor a whinge session, but a basis for change. A supervisor must challenge, asking ‘Why do you say that?’, ‘What could be different?’, ‘What would you do then?’. You wouldn’t expect a mate or colleague to do that,” points out Sara.

Confidentiality is a central tenet; a trusting relationship is paramount. “For our first meeting I suggest a chat over coffee so we can feel out whether we are on the same page and that I can offer what they want.”

She says supervisees gain a lot once they have knowledge about the way they can utilise sessions and how they own it.

“It is wonderful when a supervisee realises they have a voice and can change the way they work.”

To reach that point, Sara says the supervisee has to be open to learning about themselves and come to supervision because they want to be there, not because they were told to be there. They also need to come with issues that are real to them so there is opportunity to reflect on why things happen and how things can change.

“Supervision helps maintain a level of safety for yourself, your clients, other staff and your home life. It helps you stop carrying things, blaming yourself or taking things home.”

Relationships are often a discussion point during supervision, says Sara, particularly about ‘how difficult people are to work with’ and ‘how they need to change.’

“I explain you can’t change other people, but by changing your own behaviour and the way you approach people, you will in turn have an effect on how they behave towards you.”

Developing skills such as appropriate language and ways to approach issues with colleagues and managers in the workplace makes up a large component of supervision, says Sara.

“If you leave things, they will fester. I will always encourage people to find a way to sort out issues in a safe way.”

As well as providing professional supervision, Sara assists her team in finding supervisors and participating in supervision, determined they receive the benefits as well. She also encourages colleagues to take part in professional supervision training.

She says it is important management understand the benefits of supervision and release staff without making them feel they are letting others down by leaving a shortage of staff on the ward.

So how do you make a case to your manager for supervision? Sara suggests pointing out it will help you professionally and personally and that it reduces sickness and burnout and turnover of staff.

“I hear this not only from supervisees but from managers, and I see it myself in my staff and their supervision. It really does benefit staff practice.”



2. How will my supervisee and I benefit from professional supervision?

The benefits for your supervisee are likely to include the following.

- Better outcomes for the service users they work with.
- Better collegial relationships.
- An opportunity to reflect and link their knowledge and practice.
- Increased confidence.
- Increased satisfaction.
- Skill development.
- Greater awareness and understanding.
- Reduced stress.

The benefits for you are likely to include the following.

- Involvement in a rewarding process.
- Development in professional supervision skills.
- Development in your own professional and clinical skills.
- Greater ethical awareness in your own practice.

*"Supervision enables supervisees
to learn and flourish."*

Hawkins & Shohet, 2009 p.95



3. What is professional supervision?

Defining the term professional supervision ensures a common understanding and clarity.

The Ministry of Health (2006) defines professional supervision as:

“A formal process that provides professional support to enable practitioners to develop their knowledge and competence, be responsible for their own practice, and promote service users’ health, outcomes and safety.” (page 22).

McKenna, Thom, Howard and William (2008) added the following to further extend and clarify the practice of professional supervision.

“This involves time away from the practice environment to meet with an experienced practitioner of their choice to engage in guided reflection on current ways of practising.” (page 2).

McKenna, Thom, Howard & William, 2008

Other nursing writers define professional supervision as the following.

“Regular, protected time for facilitated, in-depth reflection on clinical practice. It aims to enable the supervisee to achieve, sustain and creatively develop a high quality of practice through the means of focused support and development. The supervisee reflects on the part she plays as an individual in the complexities of the events and the quality of her practice.”

Bond & Holland, 2001

Health professionals from psychology, counselling and social work define professional supervision similarly.

“Supervision is gathering the treasures of the past into the competencies of the present for the wellbeing of the future.”

Michael Carroll, 2010

“Supervision is a working alliance between a supervisor and a worker or workers in which the worker(s) offer an account of their work, reflects on it, receives feedback and guidance if appropriate. The object of the alliance is to enable the worker to gain in ethical competency, confidence and creativity to give the best possible service to clients.”

Inskipp & Proctor, 1995

“Supervision interrupts practice. It wakes us up to what we are doing. When we are alive to what we are doing, we wake up to what it is, instead of falling asleep in the comfort stores of our clinical routines and daily practice ... The supervisory voice acts as an irritator interrupting repetitive stories (comfort stories) and facilitating the creation of new stories.”

Sheila Ryan

These definitions have a number of common elements. This will mean that professional supervision will be the following.

- Focused on the wellbeing of service users and their family/whanau.
- Focused on providing effective innovative service delivery.
- Aimed at building your supervisee's clinical and practice skills.
- Aimed at expanding your supervisee's knowledge base and ethical competence.
- An opportunity for reflection and learning.
- Supportive of their personal and professional development.
- The responsibility of both you and your supervisee.
- Empowering, building your supervisee's confidence and self-esteem.
- A facilitative and structured process.
- Regular and occur throughout your supervisee's career.
- Driven by your supervisee's needs.
- A confidential process.

"Good supervision is transformational."

Michael Carroll, 2010

A framework to understand professional supervision

Inskipp & Proctor (1995) and McKenna et al (2008) suggest a framework to help you with understanding the tasks of professional supervision.

A. Educative/Formative function focuses on developing your supervisee's skills, understanding and abilities.

This means you and your supervisee will do the following.

- Understand how the supervisee learns and apply this to the process of professional supervision.
- Identify their training needs and set goals to meet these needs.
- Identify and develop their attitudes, skills and knowledge related to their work.
- Develop their nursing skills and competencies.
- Explore their cultural background and the impact it has on their work.
- Link theory to practice.
- Develop their critical self-reflection.
- Develop innovative and creative practice.
- Understand and apply the seven Real Skills of *Let's get real*.
- Discuss specific aspects of their work.
- Problem-solve problematic issues.

B. Administrative/Normative function focuses on developing your supervisee's understanding of the professional and ethical requirements of their practice.

This means you and your supervisee will do the following.

- Be clear about their roles and responsibilities with service users and the organisation.
- Manage their workload commitments.
- Plan their work both specifically with individual service users and overall.
- Examine his/her ethical decision-making and understanding.
- Link their practice to ethical and professional codes and standards.
- Relate the organisational policies and processes to their work.
- Take a professional approach to all aspects of their work – planning, documentation, and interaction with service users and colleagues.

C. Supportive/Restorative function focuses on developing your supervisee's ability to cope with the emotional effects of their work.

This means that you and your supervisee will:

- Work to establish a safe environment for professional supervision.
- Understand the impact of the power differences between you.
- Work out ways for your supervisee to express and explore their emotional reactions to their work.
- Examine ways to support and encourage your supervisee in their work.
- Monitor their stress and overall health.
- Consider ways to improve their wellbeing.
- Explore your supervisee's attitudes, values and beliefs as they relate to their work.
- Manage conflict and other difficult or distressing situations that may arise.

"Supervision is the bridge between what you are currently doing and what you have the capacity to do."

Ask & Roche, 2005

4. How does cultural competence fit with professional supervision?

Professional supervision is one of a number of ways of developing cultural competence.

Cultural competence involves assisting your supervisee to understand the perspectives of people who are of a different cultural group than them as well as the impact of the interaction of these cultures. Culture as a term encompasses ethnic, gender, religious, sexual identity, ability and age diversity. Competence in this area is critical to providing culturally safe and effective mental health and addiction nursing and therefore improving outcomes for service users (Ministry of Health, 2006).

Specific forms of cultural supervision include the following.

Kaupapa Maori Supervision

- McKenna et al (2008) note that it is “imperative” that nurses who identify as being Maori are “supported, nurtured and encouraged to continue to develop and integrate their clinical and cultural skills” (page 9).
- This form of supervision may occur at the same time as a supervisee’s professional supervision and may be provided by a Maori nurse, Kaumatua or Kuia who understands the Maori dimensions of wellbeing.

Pasifika Supervision

In the same way, nurses who identify as being Pasifika may choose a supervision relationship with someone from their own culture to discuss the relationship between their clinical and cultural life and the impact this may have on their work with service users and in teams. This form of supervision may occur at the same time as professional supervision.

These models may be useful for nurses from other non-dominant ethnic groups as well as nurses from other cultural groups. For example, a gay nurse may choose a cultural supervision relationship with someone from their cultural group to discuss the relationship between their practice and cultural life, and the impact this may have on their work with service users and in teams. This form of supervision may occur at the same time as professional supervision.

Cultural competence is addressed in professional supervision. A supervisee needs to develop an appreciation of cultural diversity in New Zealand, and an understanding of their own culture and impact they may have on service users and team members.

In order to understand and develop an appreciation of cultural diversity in New Zealand you and your supervisee:

- (a) **Need to understand their culture and the impact this may have on others and consider how this may impact on their practice.**

To assist with this, you and your supervisee may discuss and reflect on questions such as the following.

- What are the supervisee’s cultural values and practices?
- How have these been developed?
- What influenced these values?
- How do these values and practices influence their work with service users and colleagues?
- How do they feel about the culture of the service users they work with?
- How might a service user or colleague perceive them and their culture?



(b) Develop an awareness and knowledge of bicultural aspects of Aotearoa New Zealand.

You and your supervisee may discuss and reflect on the following topics.

- Why it is important to understand biculturalism in Aotearoa New Zealand.
- How this relates to their practice.
- Your supervisee's understanding of the broader historical context for Maori, loss of their language, colonisation and the impact on Maori today.
- Differences in culture between them, you, team members and service users.
- It may be helpful for your supervisee to consider such questions as the following.
 - What did the service user/colleague understand?
 - Did I [the supervisee] really listen and understand from their perspective?
 - What was I thinking while the service user/colleague was talking?
 - What do I think they have understood?
 - Was I aware of the non-verbal cues that may influence this relationship?
 - Did I check my understanding with the service user/colleague?
 - How might the service user/colleague see me and my culture?
- Your supervisee may choose to seek specific cultural supervision and/or advice from an expert to supplement professional supervision.

(c) Develop an awareness and knowledge of other cultural groups in Aotearoa New Zealand.

You and your supervisee may discuss and reflect on the following.

- The interaction between their culture and that of your and the service user, and the impact these factors may have on service delivery.
- It may be helpful for your supervisee to reflect on the following questions when discussing a specific situation.
 - What did the service user/colleague understand?
 - Did I [the supervisee] really listen and understand from their perspective?
 - What was I thinking while the service user/colleague was talking?
 - What do I think they have understood?
 - Was I aware of the non-verbal cues that may impact on the relationship?
 - Did I check my understanding with the service user/colleague?
 - How might the service user/colleague see me?
- Your supervisee may choose to seek cultural advice from an expert and develop links with relevant community groups to supplement their professional supervision.

Note: You will address your cultural competence in your own professional supervision.

"Supervision can create a space for a clinician to walk in two worlds."

Monique Faleafa, 2008

5. Who goes to professional supervision?

Professional supervision is for all clinical practitioners, especially qualified mental health and addiction nurses. This includes all levels of nursing management as well as your supervisor, your professional leaders and clinical managers.

"Supervision is supervisee-led."

Ask & Roche, 2005

6. How is professional supervision different from other professional development activities?

Clinical supervision and professional supervision are terms used interchangeably in practice and in the literature, causing some confusion.

- Clinical supervision is a term used to describe supervision focused on clinical practices.
- Professional supervision is a more inclusive term used to describe a practice that incorporates all aspects of a nursing role – clinical, academic, management and leadership.

Activities such as line management supervision, preceptorship, mentoring, coaching and performance management complement professional supervision.

- They are similar in that the overarching goal is the nurse's development, and developing good outcomes and effective service for service users.
- The differences lie in the purpose, function and nature of the interaction and relationship between the parties involved.

Management or line management supervision is aimed at developing and providing an effective service for service users. In order to do this, a manager is responsible for determining the relationship with a nurse, setting the agenda of that relationship and monitoring performance to meet goals. It is a hierarchal reporting organisational process.

Preceptorship is educative and is aimed at facilitating the transition from student to newly qualified practitioner. While the agenda of this relationship is determined by the practitioner, the preceptor is likely to be appointed to their role and the duration of the relationship is time limited.

Mentoring is designed to provide guidance and support for a nurse. This relationship is voluntary and informal. The mentor is selected by the nurse and they determine the agenda of the relationship.

Coaching is designed to teach a nurse a specific skill or skills relevant to their work. It is likely to be a short-term goal-directed relationship and may be initiated by a manager or practitioner.

Performance appraisal is to evaluate work performance and set goals for the following year. It is a structured organisational process that both a nurse and their manager use. Both have a joint responsibility to participate in the process.

Clinical/caseload review focuses on service users' defined issues, is aimed at treatment and involves each person in the multi-disciplinary team

Professional supervision is to develop the professional competency of the supervisee. It is a facilitated reflective process aimed at developing an effective practitioner. The content is driven by the supervisee's needs and occurs within the context of a sustained confidential relationship.

Handy Hint

There are a number of situations in both your supervisee's and your daily work life that may seem like professional supervision – conversations with a colleague about a case, attending a workshop or conference, or consulting with someone with specialist knowledge. These situations are useful as part of the supervisee's work experience providing support knowledge and advice. They are not professional supervision and do not replace the professional supervision process. They do not meet the three functions of professional supervision – educative, administrative, supportive.

"Supervision acts like a bridge between what you are currently doing and what you have the capacity to do."

Ask & Roche, 2005

7. What can I expect from professional supervision?

You can expect professional supervision to be the following.

- About providing a better service to service users.
- Appropriate to your culture and that of the service users you work with.
- A formalised relationship with a contractual agreement.
- Appropriate to your career stage.
- Safe and non-judgmental.
- Occurring at least monthly for 1 to 1.5 hours at a time.
- Individualised and focused on you and your work.
- Focused on your skills development.
- About your learning.
- Supportive and strength focused.
- Reviewed annually.
- Constructive.
- Compassionate.
- Challenging.
- Respectful and honest.
- Supported by your colleagues and management.
- A clear process where the roles and responsibilities of all parties (you, the supervisor, your manager and clinical leader) are defined.
- Confidential.
- Ethical.

Handy Hint

Professional supervision is not a remedial oversight for nurses whose practice has been assessed as impaired.

*"Supervision is keeping
the world light."*

Interviewee, Te Pou National Guidelines, 2009

8. What type of professional supervision is best for me?

The following table describes and outlines types of professional supervision.

Your organisation's professional supervision policy will state their preferred type of professional supervision.

Format of professional supervision	Advantages	Disadvantages	Best for
One to one			
<ul style="list-style-type: none"> Internal to your team 	<ul style="list-style-type: none"> Focus on individual supervisee Context and specifics of job well understood Service issues dealt with readily Socialise into the profession Policies and processes understood 	<ul style="list-style-type: none"> Difficulty in ensuring adequate resources: sufficient trained supervisors, cost and time Total reliance on self-report Issues with dual relationships Only one other perspective Possible power imbalance Potential for multiple/dual relationships 	<ul style="list-style-type: none"> Ideally suited to newly qualified supervisee
<ul style="list-style-type: none"> External to your team but in same organisation 	<ul style="list-style-type: none"> Focus on individual supervisee Context and specifics of job understood Socialise into the profession Service issues may be dealt with Policies and processes understood 	<ul style="list-style-type: none"> Difficulty in ensuring adequate resources: sufficient trained supervisors, cost and time Total reliance on self-report Supervisor may not understand dynamics and procedures in your team Only one other perspective Potential for multiple/dual relationships 	<ul style="list-style-type: none"> Ideally suited to newly qualified supervisee
<ul style="list-style-type: none"> External to the organisation 	<ul style="list-style-type: none"> Perceived greater safety Supervisee may find disclosure easier Focus on individual supervisee Less chance of dual/multiple relationships 	<ul style="list-style-type: none"> Cost (financial and travel) Supervisor may not understand dynamics and processes of organisation/team May be difficult if issues arise about performance and service user's safety Could lead to collusion 	<ul style="list-style-type: none"> Ideally suited to practitioners with some experience

Format of professional supervision	Advantages	Disadvantages	Best for
Peer one to one			
	<ul style="list-style-type: none"> Shared role supervisee/supervisor Safe and trusting relationship Self-selected 	<ul style="list-style-type: none"> Can become too comfortable May not be sufficiently challenging 	<ul style="list-style-type: none"> Ideally suited to experienced practitioners only
Group			
<ul style="list-style-type: none"> Peer Group 	<ul style="list-style-type: none"> Non-hierarchical Cost-effective Less threatening Opportunities to learn Learning enhanced by different perspectives Can build sense of belonging 	<ul style="list-style-type: none"> Can become social resulting in less learning Can be hijacked by group dynamics 	
<ul style="list-style-type: none"> Facilitator led 	<ul style="list-style-type: none"> Can lead to increased motivation to learn Can build a sense of belonging Learning enhanced by different perspectives 	<ul style="list-style-type: none"> Can be unsafe at a personal level Significant issues related to self not discussed Difficulty staying on task and time Tendency to be too supportive 	
<ul style="list-style-type: none"> Technology, Skype, email, telephone 	<ul style="list-style-type: none"> Will solve problems of access/isolation More relaxed Best if combined with face-to-face Reduces inhibitions Allows for immediate response 	<ul style="list-style-type: none"> Dynamics of supervision relationship could be affected 	<ul style="list-style-type: none"> Ideally suited to more experienced practitioners
<ul style="list-style-type: none"> Cross-discipline 	<ul style="list-style-type: none"> Useful for further specialist knowledge Can help when geographically isolated Supports multi-disciplinary team (MDT) approach 	<ul style="list-style-type: none"> Specifics related to professional discipline may not be known and understood 	<ul style="list-style-type: none"> Ideally suited to more experienced practitioners



Handy Hint

One to one professional supervision is the most common type of professional supervision in practice.

- Usually it is internal or external to the supervisee's team but within their organisation.
- Engaging in more than one type of professional supervision is beneficial to further increasing your confidence and competence.
- The best format for you will depend on your work role, experiences, cultural background and values, where you are in your career and even the location of your service.

"Supervisors are 'available, accessible, able and affable'."

Ask & Roche, 2005

9. What are my rights and responsibilities as a supervisor?

You have the right to the following.

- Be treated respectfully and as an equal partner in the relationship.
- Have some choice in who will be your supervisee.
- Develop a contract with your supervisee outlining the purpose, function and process of professional supervision.
- Confidentiality except under certain conditions.
- Refuse requests that compromise your ability to develop an effective supervision relationship, e.g., requests for information from the supervisee's manager or colleagues.
- Challenge the supervisee's behaviour, attitudes and values where you are concerned about their practice, professional development and use of professional supervision.
- End a professional supervision relationship when commitments change or difficulties arise.
- Engage in your own professional supervision.

It is your responsibility to:

- Initiate and seek your own professional supervision.
- Keep supervision focused on service user outcomes.
- Attend supervision training.
- Work to achieve an effective alliance with your supervisee.
- Provide appropriate feedback.
- Work from a strength based approach.
- Reflect on your role in the supervision relationship.
- Participate in pre-supervision activities – self-audit, initial meetings, negotiating a contract.

- Be available, punctual, reliable and engage openly and honestly in the process.
- Maintain appropriate boundaries (especially dual relationships), for example, management issues are dealt with at a separate time and venue.
- Ensure professional supervision is not counselling or therapy.
- Be open to appropriate challenge and feedback from your supervisee.
- Work in partnership with management and clinical leadership to implement professional supervision.
- Work to reduce the power imbalance in the professional supervision relationship.
- Initiative informal/formal reviews of your professional supervision relationship with your supervisee.
- Challenge the supervisee's practice carefully, having regard for his/her developmental stage and personal style.
- Conduct professional supervision in an ethical and professional manner reflecting the principles of the Treaty of Waitangi.
- Work to understand cultural differences and diversity between yourself and your supervisee, their colleagues and the service users they work with.

"Supervision is the worker's most important relationship."

Morrison, 2001

10. What does a supervisor do?

As a supervisor you will:

- Attend specific professional supervision training.
- Facilitate your supervisee's learning within the context of the professional supervision relationship.

General supervision skills you will use include:

- A focus on strengths.
- Active listening skills – paying attention, verbally and non-verbally, understanding the supervisee's perspective, and using silence to allow for self-reflection and insight.
- Explicit genuine positive regard and support.
- Demonstrate enthusiasm and encouragement by discussing your supervisee's strengths and achievements.
- Use open-ended questions to encourage self-reflection.
- Awareness of power imbalance with identified ways to address these.
- Practising (model and role play) aspects of work with a service user.
- Positive feedback.
- Problem-solving.
- Being able to contain your own emotional reactions such as anxiety, helplessness, embarrassment or irritation.

These strategies build an effective relationship, allowing your supervisee the opportunity to learn and develop.

You may also, though less frequently:

- Give advice.
- Provide information and resources.
- Disclose an experience you have had that is relevant to your supervisee's practice.
- Give specific direct instructions.
- Challenge the supervisee to think differently or recognise a blind spot.
- Observe their work with a service user.

Handy Hint

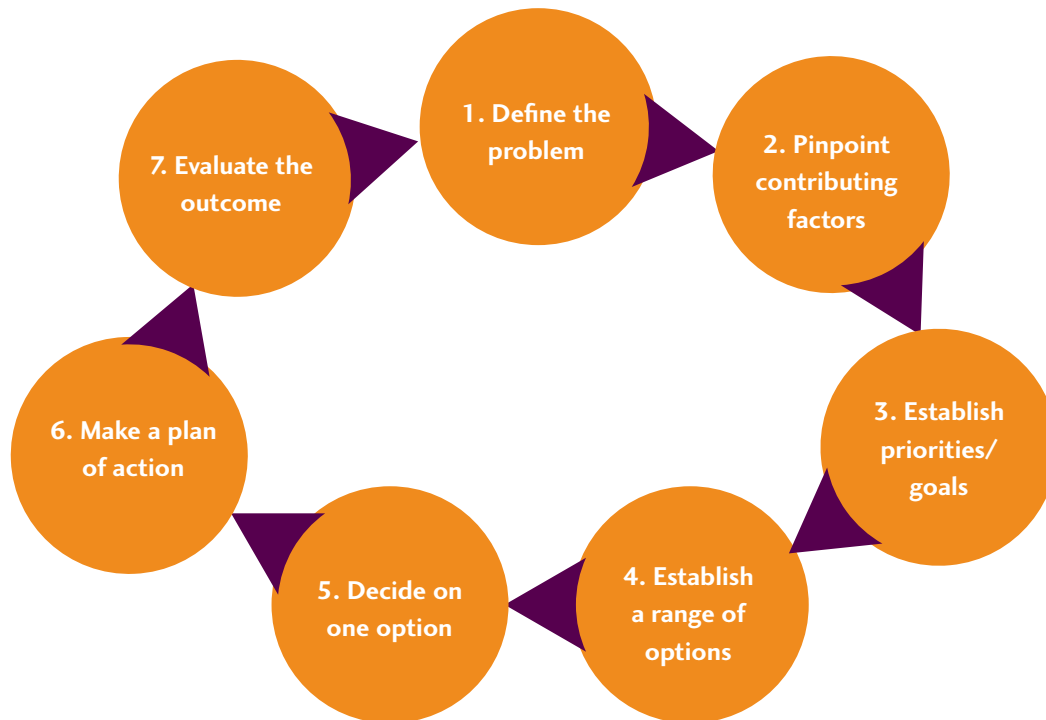
Facilitated learning contributes to a supervisee's self-development and increased effectiveness.

"Supervision occurs in the room."

Michael Carroll, 2010

i) What specific tools will help my supervisee learn?

Problem Solving Spiral Bond & Holland (2001)



The following are examples of questions you may ask to assist your supervisee to problem-solve.

Define the problem

- What happened?
- What do you think are the issues?
- What concerns you the most?
- What have you tried?

Pinpoint contributing factors

- What is contributing to this situation?
- Who/what had the greatest impact?
- Is there anything you don't know?
- What else do we need to know?
- What might you have done to contribute to the situation? Anyone else?
- Where should you start?

Establish priorities

- What were you hoping to achieve?
- Has this changed? What can be achieved?
- What might be realistic? What is most important?
- In an ideal world, what would success look like?

Establish a range of options

- What have you tried?
- What worked/didn't work?
- What other options are there?
- Let's think creatively, what might be some other options?
- What might someone else come up with?
- What would happen if you did nothing?

Decide on an option

- What will be most effective?
- What will be the most difficult?
- What will you find hardest to do?

Make a plan

- What will be your first step?
- What will success look like?
- What will your plan look like?
- Whose help do you need?
- When will you take the identified steps?
- Who do you need to discuss this with?

Evaluate

- How much of the plan did you achieve?
- What went well, less well?
- What would you do differently?
- What needs to happen next?

Questions adapted from Bond & Holland (2001) page 113-115

Another tool is the **Experiential Learning Cycle** Kolb (1984)



Questions to help your supervisee explore and reflect on each area of the cycle might be:

Experience

- Describe what happened.
- Take me through the event, situation.
- What was the purpose?
- Who else was present?
- And then what happened?
- How did the client react? Say? Do?

Reflection

- What was your reaction? The service user's reaction?
- What were you thinking? What was going through your mind?
- And then what? How did you know what their reaction was?
- Has this happened before? What happened?
- What do you think went well? What did you do well? What were your strengths in this situation? What were the service user's strengths?
- What do you think went less well?

Conceptualisation

- Why do you think this is happening?
- How else could we understand this?
- What do you think is causing/contributing to this problem?
- What role does the culture of this person play?
- How does this fit with guidelines, policy?
- How would the service user explain what happened?
- How would (a different model or professional) view this situation?
- What theories or principles might help us understand this?
- Are there any personal connections you make to this situation?
- What does the literature say that might be helpful here?

Planned experimentation

- Given what we have discussed, what would you do now? What would you do differently next time?
- What have you tried in the past? How might that work here?
- How ready do you feel to try that?
- Would you like to practise that?
- What else would you need to do in order to feel able to ... ?
- What strengths do you have to draw on?

"Supervision is holding something up to the light and turning it."

Michael Carroll, 2010

11. How do I go about doing professional supervision?

Professional supervision involves four stages.

- Getting ready to do supervision.
- Starting and doing supervision.
- Developing and maintaining the relationship.
- Ending the relationship.

a.) What can I do to get ready for professional supervision?

i) Learn about professional supervision

- Know your organisation's professional supervision policy and procedures.
- Attend introductory training. The minimum training is a short course (two-five days) covering the theory and practice of professional supervision and providing for an opportunity for actual practice of a supervision session.
- Know your professional and regulatory bodies' expectations for professional supervision.

ii) Set up your own professional supervision relationship

- Refer to Guide for Nursing Supervisees.

iii) Conduct a self-audit

Before beginning supervision, reflect on the following questions and consider how the answers will impact on how you will supervise.

- What has been your work experience?
- How has this shaped your thinking about your profession?
- What are your professional areas of strength or weakness?
- Where are you in your life? Will this have an impact on professional supervision?
- What are your personal strengths and weaknesses?
- What are your goals for the future?
- What have been your experiences with professional supervision – in the profession, outside the profession?
- What was useful/not useful about these experiences?
- How do you think these experiences will impact on you as a supervisor?
- What did you do to contribute/hinder previous supervision relationships?
- How do you learn?
- How are you at giving feedback? Do you avoid giving feedback?
- How are you at receiving feedback? Do you get hurt or anxious?
- What is your philosophy of professional supervision?
- What might you expect/want from supervisees?
- What cultural values/attitudes are important to you? How might these impact on the professional supervision process?
- Does a supervisee need to be of the same cultural group (ethnicity, age, gender, sexual orientation) as you?
- Who would you like to supervise – stage of professional development, personality type, characteristics?
- What training would you prefer a supervisee to have had?
- What arrangements are important (venue, timing, duration)?

iv) Have an initial meeting with a supervisee.

Pre-supervision meetings will help you decide whether there is a match between you and a supervisee.

- Arrange to meet a potential supervisee for about an hour.
- Be prepared (refer to self-audit).
- Allow the supervisee to talk about themselves, their strengths and areas of development, their professional practice and what they want from supervision.
- Talk about your professional experience, supervision experience and your expectations of professional supervision.
- Discuss your preferred models of professional supervision.
- Consider and discuss what similarities and differences there are between you and a potential supervisee. Reflect on how these will impact on supervision and whether they can be managed.
- Take time to decide whether there is a good fit between you and the supervisee.

Handy Hint

Regardless of whether or not you and the supervisee have chosen each other, this information will help you both to get the best from professional supervision.

b.) What happens in professional supervision sessions?

i) Developing a professional supervision contract.

Negotiating the content of the contract helps in developing an effective professional supervision relationship and avoiding misunderstandings in the future.

- Review your organisation's contract template and process.
- Note what you want to include or add.
- Discuss with your supervisee.
- Personalise your organisation's template.

Contracts should include the following.



Handy Hint

Professional supervision contracts are between you, your supervisee and the organisation.

"A professional supervision contract is a promise for the future."

Michael Carroll, 2010

ii) Assess your supervisee's strengths and areas for development.

- Set aside time with your supervisee to reflect on their strengths and areas for development.
- Use their job description, performance appraisal, Professional Development and Recognition Programmes (PDRP), Nursing Council of New Zealand Competencies (2007) and the performance indicators of *Let's Get Real* (2008) as frameworks to assist your supervisee to reflect on their strengths and areas for development.
- Assist your supervisee to identify specific strengths, areas for development and set goals to develop both.
- It is your responsibility to maintain the focus on these goals throughout the year.

iii) Content of professional supervision sessions.

A supervisee may bring any issue that affects their practice. This includes personal issues only in the way it impacts on their work.

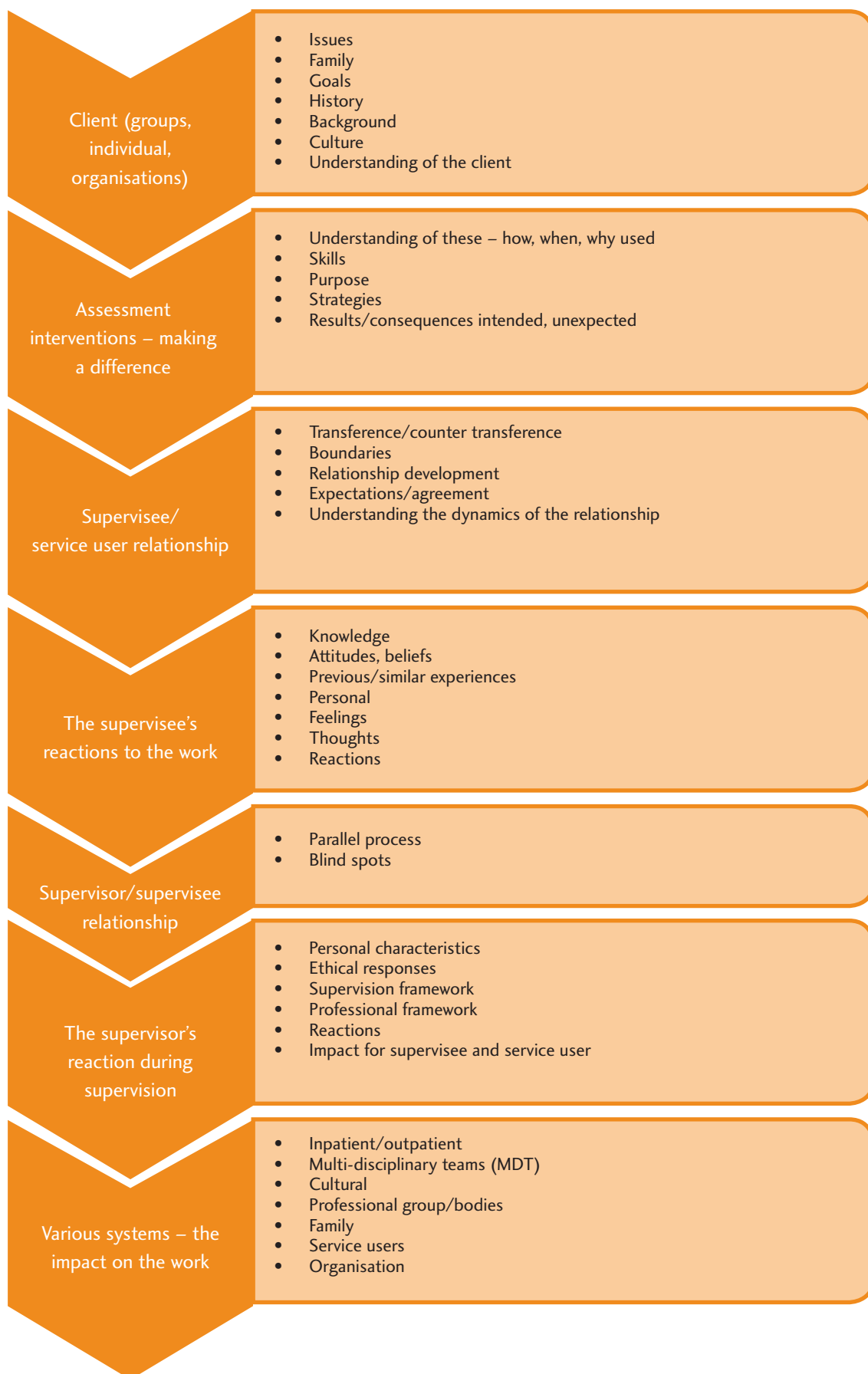
- They are likely to bring the following topics to sessions:
 - issues that arise when working with a service user
 - issues with colleagues
 - organisational issues
 - specific assessment and intervention strategies
 - emotional impact of the work
 - stress and pressures impacting on their work (personal and professional)
 - their professional development
 - their career development
 - professional and ethical issues.

Your responsibility is to maintain an overview of their development.

- Frameworks that will help to maintain this overview include the following.
 - Normative, Formative, Supportive – Inskipp & Proctor (1995). It is your responsibility to ensure these three functions occur across sessions. Care must be taken to ensure that one function does not become the focus (e.g., primarily formative with a student or new graduate; or primarily supportive with a stressed supervisee).
 - Seven Eyed Supervisor, (Hawkins & Shohet (2001); Carroll & Gilbert (2004)). This is a process model to assist you and your supervisee to cover relevant aspects of a specific issue they may bring to professional supervision.

"It is the task of the supervisor to enable the supervisee to become more aware of what actually takes place in a session with a service user."

Shainberg, 1983, cited in Hawkins and Shohet, 2009, p.84



iv) Prepare for each session.

- Take some time to review previous session notes, action items and your reflections.
- List your thoughts for an agenda.
- Settle yourself.

v) Structure of a supervision session.

Professional supervision sessions have a structure – a beginning (welcome, settling, setting an agenda), a middle (discussing agenda items) and end (summing up, agreeing to actions, feedback) to each session.

Beginning

- Welcome.
- Settling the supervisee so they can move from the action oriented nature of their work to becoming self-reflective.
- Setting an agenda, prioritising and allocating time. For example, ask:
 - what do you want from the session today?
 - what's the most important item?
 - how long would you like to spend on each item?
- Follow up about cases/issues/tasks discussed previously.
- Prompt for successes.

Middle

- Discuss agenda items.
- Set goals for each item by asking the supervisee:
 - what do you want from this discussion?
 - what do you hope will change as a result of discussing this?
 - where would you like us to concentrate our discussion?
- This allows the supervisee control and to have their needs in relation to the issue met. It also prevents 'fishing expeditions' or irrelevant, unfocused discussion.
- Check for ethical or safety issues.

End

- Ask your supervisee to sum up.
- Check you agree on plans/tasks.
- Ask for feedback:
 - how was the process today?
 - is there anything you would like to change/do differently?
 - what is the take-away message today?
- Check back on goals for the session:
 - you said that you wanted to achieve Have we done that? Have we answered your question?

"The unexamined life is not worth living."

Socrates

vi) Record keeping.

- Read your organisation's policy on notes taken in supervision.
- Copy your organisation's template to use.
- You and your supervisee may keep your own notes.
- As a minimum, record dates and times of sessions, the agenda, agreed actions and ethical concerns.
- Check that you both agree on what is written down as actions.
- Store notes in a locked filing cabinet.

c.) How do I build the supervision relationship?

- Understand the dynamics of the relationship.
- Attend professional supervision training.

i) Manage the challenges that may arise

Issue	What can I do?
I find it hard to stay focused in sessions.	<ul style="list-style-type: none"> ▪ Attend training. ▪ Discuss in your own supervision. ▪ Set an agenda, use a whiteboard.
My supervisee is very quiet and doesn't talk very much in sessions.	<ul style="list-style-type: none"> ▪ Discuss in your own supervision. ▪ Slow your pace. ▪ Consider different learning styles.
My supervisee says he doesn't have anything to discuss.	<ul style="list-style-type: none"> ▪ Look back at contract to check what was agreed to. ▪ Review process with supervisee. ▪ What is working/not working/possible reasons.
I feel really anxious when my supervisee gets upset in sessions.	<ul style="list-style-type: none"> ▪ Discuss in your own supervision. ▪ Reflect on reasons for this – consider previous experiences. ▪ Consider strategies to manage/contain own feelings.
What do I do – my supervisee seems depressed?	<ul style="list-style-type: none"> ▪ Discuss in your own supervision. ▪ Consider ways to approach topic with supervisee. ▪ Refer on.
What do I do – my supervisee has acted in an unethical way with a service user?	<ul style="list-style-type: none"> ▪ Discuss in your own supervision. ▪ Explore details with supervisee. ▪ Work to resolve. ▪ Encourage supervisee to take to their manager. ▪ Report to manager.
What do I do – my supervisee talks about her team members in a disrespectful way?	<ul style="list-style-type: none"> ▪ Discuss in your own supervision. ▪ Explore/help supervisee reflect on team relationships.
Sometimes I feel like we are just chatting. I thought professional supervision was about learning.	<ul style="list-style-type: none"> ▪ Refer back to contract. ▪ Seek feedback from supervisee. ▪ Look at process – set an agenda.

ii) Reviewing professional supervision.

Reviewing the professional supervision process and relationship should occur regularly to ensure best practice, an effective process and that it is meeting the supervisee's needs.

Informally

Regularly ask your supervisee questions such as the following.

- What was helpful today?
- Did we meet your goals for this session?
- What learning was important?
- How was the session for you?
- What did you find challenging today?
- Is there anything I should have done that I didn't do/could do better?
- How is the process between us?
- I noticed you were very quiet when I raised Can we talk about that?
- How is supervision going for you? What is helpful/unhelpful about the process?

Early review of new supervision relationship

- Schedule a review three/six months after supervision starts.
- Discuss how you might do this review and what would be useful to cover with your supervisee.
- You may like to ask the following.
 - Is supervision meeting the agreed goals?
 - Are there are changes to be made to the contract?
 - What has been helpful/unhelpful so far?
 - What has been the learning/impact on your work with service users/colleagues?
 - Is there anything you would change?
 - What feedback would you like to give me?
 - How do you see our relationship?
 - Is there anything about the process that is unclear?
 - Are there any differences between us that hinder the process?

Your organisation will require an annual review

- The annual review may be a discussion between you and your supervisee, or an anonymous survey. Your supervisee's manager may also ask for general feedback from them during a Performance Appraisal.
- Topics to cover in an annual review include the following.
 - The impact of professional supervision on the supervisee's practice.
 - Their views about the supervision relationship.
 - Helpful/unhelpful aspects of the process.
 - Changes your supervisee may like to the process or content.
 - Whether their goals are being met.
 - Any feedback they may have for you.

d.) How and when do I end a professional supervision relationship?

- Supervision relationships mostly end because of the following.
 - You or your supervisee change roles or leave the organisation.
 - The contracted number of sessions is completed.
 - Your supervisee's learning needs are no longer being met.

In these circumstances a planned approach can be taken to ending the relationship, allowing for review and feedback on the process.

- Less commonly, a supervision relationship may end because of the following.
 - There is a poor match between you and your supervisee.
 - Either you or your supervisee behaves in an unethical way.
 - You and your supervisee are unable to resolve significant differences.
 - Your supervisee attends so infrequently that the process is of no value to them or you.

12. Useful resources

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