An overview of Supervision

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Supervision is being used more and more in clinical and work settings and in many situations it is mandatory. For example, accredited counsellors have to have an hour and a half’s Supervision a month to keep their accreditation.

The main advantages of having Supervision are:
- A happier, more positive workforce
- A more supportive work environment
- Shared learning
- Improving quality of care and this:
- Promotes confidence
- Decreases the incident of emotional strain and burn out
- Increases self awareness

So what is Clinical Supervision?

Many practitioners will say that elements of Supervision already take place within their work environment. Well this is probably true. Supervision, however, offers the opportunity to critically reflect on any aspect of an individual’s work within a safe and protected environment with the aim of developing their professional practice.

Proctor (1992) sets out the three main functions of Clinical Supervision:
- **Formative**: the educative process of developing skills
- **Restorative**: supportive help for professionals working constantly with distress and stress
- **Normative**: the managerial and quality control aspects of professional practice, maintaining appropriate standards of care

Supervision can be broadly divided into four main categories:

- **Clinical**: It is an opportunity to reflect on complex cases, approaches to treatment and care, evaluation and planning. This does not replace discussions made within the work environment but offers an opportunity for the supervisee to reflect and explore their feelings and thoughts on a particular clinical / work issue.

- **Managerial**: The focus is on balancing a workload, administrative procedures, meetings, planning and strategy, data collection, audit activity, recruitment and retention issues, plus liaison and communication.

- **Personal**: This links in with staff interpersonal issues, job pressure, motivation, job satisfaction, team issues. Supervision should never become counselling, but there is a need to allow staff space to express their feelings related to their work.

- **Professional**: This gives the practitioner the opportunity to reflect on their professional role and skills within the multidisciplinary team. This may lead to identification of specific training or development needs.

An often-made assumption is that Supervision is the same as mentorship and this is not accurate as mentorship is concerned with the learning relationship between two members of staff, the primary aim being to help the supervisees apply theory to practice and to develop practical skills.

Approaches to Supervision

There are a number of different formats that supervision can take. The key to success is to employ an approach, which is most suitable for you and your work environment. You need to explore what you consider to be the main functions and benefits of Supervision and what you want to get...
out of it. Once you have decided you can adopt an approach which suits your specific needs.

**One-to-one supervision:** This can either be with a supervisor from your own discipline or with a supervisor from a different discipline. We do, however, recommend selecting a supervisor outside of your work area, as it may be difficult to raise certain issues with a member of staff you work closely with. It may also be more difficult to release two members of staff from one area at the same time.

**Advantages**
- You are more likely to attend sessions
- Building a trusting relationship with the supervisor
- A privacy exists especially for those who feel uncomfortable opening up in front of colleagues
- You will prepare for the session as it is more personal to your needs and practice
- It is easier to arrange
- Continuity

**Disadvantages**
- Possibility of incompatibility with your supervisor
- You don’t get the benefit of other views, opinions and perspectives
- Can become ‘intense’

**Group Supervision**

**Advantages**
- Supervisee benefits from the guidance and expertise of the supervisor and members of the group
- It is more cost effective
- Group dynamics can be stimulating
- Can be from different grades and clinical areas
- You can build supportive and facilitative relationships with other group members

**Disadvantages**
- Group members and the supervisor have to contend with group dynamics
- For less experienced staff the experience may be threatening
- High level of skills are needed for the supervisor
- Group may take a long time to gel, so that the process and benefits take time to emerge

**Peer Supervision:** A group of practitioners from the same clinical area.

**Advantages**
- Group members are more likely to understand your particular issues as they can relate to that area of practice
- Can discuss new developments

**Disadvantages**
- May be difficult to organise
- Possibility that the group may become insular, only focusing on their speciality and ignoring the wider context
- Potential to become personal or too ‘close to home’. If the issues to be addressed involve individuals from the same area the potential for conflict exist which could damage the confidentiality aspect of the Supervision.

**Management supervision:** An individual is supervised by their manager.

**Advantages**
- Displays a commitment and support to supervision from the manage

**Disadvantages**
- Difficulty exists in separating the manager/supervisor role
- Supervisee may be inclined to be less open in their disclosures
- All approaches should incorporate ground rules regarding the supervision sessions.

As an accredited counsellor and Supervisor, I have had Supervision for the last 30yrs. It has always been such a worthwhile experience and I have learnt such a lot from each one of my Supervisors.