

# **SAFEGUARDING SUPERVISION POLICY (CHILD AND ADULT)**

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## REVIEWERS

This document has been reviewed by:

NAME	DATE	TITLE/RESPONSIBILITY	VERSION
S Vincent	10/4/14	Designated Nurse for Safeguarding Children	V3
J Atkinson	16/4/2014	Lead Nurse for Safeguarding Adults	V3
J Atkinson	16.03.17	Designated Nurse for Safeguarding Adults	V3.2
S George	16.03.17	Designated Nurse for Looked After Children and Young People	V3.2

## APPROVALS

This document has been approved by:

NAME	DATE	VERSION
Quality and Safety committee	September 2014	V3
Quality and Safety Committee	16 January 2018	V3.2

NB: The version of this policy posted on the intranet must be a PDF copy of the approved version.

## DOCUMENT STATUS

This is a controlled document. Whilst this document may be printed, the electronic version posted on the intranet is the controlled copy. Any printed copies of the document are not controlled.

## RELATED DOCUMENTS

These documents will provide additional information:

CCG	Safeguarding Children Commissioning Policy	2015
HM Gov	Working Together to Safeguard Children	2015
HM Gov	The Care Act	2015

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## 1.0 INTRODUCTION

- 1.1 Effective supervision is essential to professional development. It provides opportunity to put concerns into perspective and address issues that might otherwise be overlooked. Supervision enables reflection on actions already taken and planning for actions needed to develop. This helps the supervisee to develop confidence in decision making. The supervisor may need to be more directive if a worker lacks the knowledge and experience required to resolve a particular issue. Such an interventionist approach should always be accompanied by discussion as to why a particular course of action is needed. Supervision also provides opportunity to let a worker know they are doing a good job and to offer any support or encouragement needed.
- 1.2 The requirement for staff supervision where children are considered to be at risk of significant harm is well documented. Victoria Climbié Inquiry, Lord Laming (2003). Whilst supervision within adult safeguarding has been practiced for some time within Social Care, it is a relatively new concept within health. However Dudley CCG recognises that safeguarding supervision is integral to providing an effective person/child centred service and that it has a responsibility to ensure that appropriate staff receive and deliver supervision on a regular basis. “
- 1.3 Effective professional supervision can play a critical role in ensuring a clear focus on a child’s welfare. Supervision should support professionals to reflect critically on the impact of their decisions on **the child and their family**” (Working Together 2015)

## 2.0 DEFINITIONS:

### Children

- 2.1 **Child:** In this policy, as in the Children Act 1989 and 2004, refers to anyone who has not yet reached their 18th birthday. “Children” therefore means children and young people throughout.
- 2.2 **Child in need** – (Children Act 1989 s.17) A child is considered to be in need if:
- He or she is unlikely to achieve or maintain or to have the opportunity to achieve or maintain a reasonable standard of health or development without provision of services from the LA;
  - His or her health or development is likely to be significantly impaired, or further impaired, without the provision of services from the LA;
  - He or she has a disability.
- 2.3 **Child in need of protection:** A child for whom there is **reasonable cause to suspect** that a they may be suffering, or likely to suffer, significant harm, or an Emergency Protection Order or use of police powers of protection have been used. This constitutes a duty for the Local Authority to make enquiries (Children Act 1989 s.47)
- 2.4 **Significant Harm** – threshold which justifies compulsory intervention in family life in the best interests of the child

### Adults:

- 2.5 An **Adult at risk** is a person aged 18 or over and who: are unable to safeguard their own well-being, property, rights or other interests, are at risk of harm, and because they are affected by disability, mental disorder, illness or physical or mental infirmity, are more vulnerable to being harmed than adults who are not so affected.

2.6 An **adult is at risk of harm** if:

- Another person's conduct is causing (or is likely to cause) the adult to be harmed, or
- the adult is engaging (or is likely to engage) in conduct which causes (or is likely to cause) self-harm.

### 3.0 AIMS OF THE POLICY

3.1 The aims and objectives of this policy are to promote and develop a culture that values and engages in regular safeguarding supervision in order:

- To provide high quality services, advocating best practice and safe service development
- To provide formal support and guidance for all Safeguarding Leads working with vulnerable children and adults, in order for them to carry out their safeguarding responsibilities according to CCG and Local Authority Policies.
- To ensure that all members of staff working within safeguarding and Looked After Children agendas understand their role, responsibilities and scope of professionals discretion and authority regarding safeguarding children and adults in the multi-agency arena.
- To provide a source of advice, support and expertise for staff in an appropriately safe learning environment
- To provide opportunity for reflection and critical incident analysis, to identify, deal with and learn from near misses and mistakes and ensure best outcomes for vulnerable adults and children
- To endorse clinical judgements and provide specialist support when circumstances require it in the safeguarding process.

### 4.0 WHY SUPERVISION?

4.1 Supervision is a term used to describe a formal and agreed process of professional support and learning which enables practitioners to develop knowledge and competencies. The process allows the practitioner to assume responsibility for their own practice and to provide an enhanced service for the service user. It is defined as:

*"An accountable process which supports, assures and develops the knowledge, skills and values of an individual, group or team. The purpose is to improve the quality of their work to achieve good outcomes"*

**Promoting effective supervision (Skills for Care and CWDC 2007)**

4.2 Safeguarding has become a key word used, and sometimes misused, to describe activities to promote the safety of children and adults. In the context of Child Protection, the term reflects the legal responsibilities of every person in society along a continuum attitudes and actions. At Law, all adults are required to, not only check but **promote** the welfare of any child they come into contact with, take action to ensure the child is **safe** from significant harm, and invoke formal legal **child protection** procedures where there is concern that a child is at serious risk:

## **Serious Case Reviews and Safeguarding Adult Reviews: Trends & Themes in Family Histories:**

### **In the Family:**

- ☒ Domestic abuse
- ☒ Mental ill-health and depression
- ☒ Substance misuse/drugs and alcohol
- ☒ History of abuse and neglect
- ☒ Unstable relationships

### **In the Agency:**

- ☒ Inadequate Supervision
- ☒ Poor information Sharing
- ☒ Barriers to Communication
- ☒ Lack of due consideration of significant client information particularly males
- ☒ Rule of Optimism (applying overly positive interpretations to cases)
- ☒ Poor record keeping

4.3 Supervision enables staff to see “the whole picture” by “thinking family” and to recognise the impact that parental and family behaviours have on children and young people and vulnerable adults.

## **5.0 THE SUPERVISION PROCESS**

### **Individual Supervision**

5.1 This process will be based around Gibbs reflective cycle, which is a common model of reflection used frequently within health. It is a clear and precise process allowing for description, analysis and evaluation of the experience helping the reflective practitioner to make sense of experiences and examine their practice. Reflection alone is not sufficient. The practitioner must then put any learning into practice and to enable the reflective process to inform practice. Taking action is the key; and the process encourages development of an action plan enabling the reflective practitioner to explore and review their practice and to determine what changes are required in order to develop their practice in order to improve outcomes for vulnerable people. For Designated, Named and Lead staff supervision may be more strategic and be based around an overview of roles and responsibilities as well as individual case discussion.

### **Group Supervision**

5.2 The Designated, Named and Lead safeguarding professionals within Dudley will offer group supervision to all staff who are case load holders but who do not necessarily have on-going responsibility for child protection. The Designated Nurses within the CCG will offer to conduct such supervision at the request of the safeguarding leads if there are particularly complex issues.

### **Specialist Supervision**

5.3 It is recognised that there may well be occasions when supervision of a more specialist nature is required either on an ad hoc basis or for a specific piece of work of a fixed duration. This will be so particularly in circumstances where the supervisee

is confronted with experiences outside of his/her normal clinical practice. The need for such specialist supervision will be agreed between the supervisor and supervisee. The supervisor in conjunction with the clinical manager/team leader will be responsible for facilitating access in this respect. This additional supervision arrangement will not replace but enhance existing arrangements.

### Ad-hoc supervision

- 5.4 It is recognised that staff will often require advice or support in relation to safeguarding adults outside of formal supervision sessions. In the first instance they should approach the safeguarding organisational leads, who will record the information discussed and the actions agreed. All staff should have access to daily ad hoc supervision for urgent and routine work, which should be recorded by the supervisor for quality assurance purposes and by the supervisee in the relevant documents. This type of supervision will not involve a contract of supervision.

### Supervision matrix

Staff Group	Supervisor	Type of supervision	Frequency
Designated Nurses CCG	Out of area peer	Individual/ Group	3 monthly
Named GP	Designated Doctor	Individual	3 monthly
Named Nurses and Midwives and Looked After Children Specialists within provider organisations.	Designated Nurses	Individual	3 monthly
Adult Safeguarding professionals Mental Capacity Leads	Designated Nurse Safeguarding for Adults	Individual	3 monthly
All CCG & provider staff to include GP members staff and Intermediate Care and Continuing Health Care (children and Adults)	Designated Nurses	Ad hoc	As required
Frontline Provider staff	Named Nurses/Doctors	Individual or Group supervision as appropriate to role	3 monthly

- 5.5 This is not an exhaustive list and CCG will offer safeguarding supervision to any health care staff or other professional working with the healthcare environment at their request

- 5.6 All documentation must be completed and a copy given to the supervisee and a copy retained by the supervisor (forms can be accessed below)

## 6.0 THE SUPERVISION CONTRACT

- 6.1 Formal individual supervision sessions will be undertaken within a supervision contract. The purpose of this contract is to ensure:

- Clarity of expectations.
- Roles and responsibilities are understood
- Practical issues are agreed

- 6.2 A copy of the contract will be held by the supervisor and the supervisee. The supervisor will take responsibility for monitoring and reviewing the contract with the supervisee as necessary.

## **7.0 RESPONSIBILITIES**

### **CCG**

- 7.1 The CCG will ensure that staff are allowed appropriate time and support to fulfil the requirements of the supervision process and to ensure that staff who provide (and receive) safeguarding supervision are appropriately qualified, in receipt of appropriate continual professional development and arrange their own regular supervision.

### **Line Managers**

- 7.2 It is the responsibility of the line managers to address any managerial issues arising from supervision. These may include the need for additional resources, caseload issues, any potential disciplinary matters, or health and safety issues.

### **Staff providing services to children and families**

- 7.3 It is the responsibility of all staff working with children and families to access and participate in supervision according to this policy.

### **CCG Designated Nurses for Safeguarding (Children, Looked After Children and Adults)**

- 7.4 These members of staff will deliver safeguarding supervision to safeguarding specialist within provider organisations. For example this will include Named Nurses, Specialist LAC Nurses, Named Midwife, Safeguarding Adult Leads and other members of the safeguarding teams.

### **Named GP**

- 7.5 The Named GP for the CCG will receive safeguarding supervision from the Designated Doctor

### **Supervisors**

- Within Dudley CCG safeguarding supervisors include the Designated Nurses for Safeguarding Children and Young People, Looked After Children and Adults.
- The supervisor has the primary responsibility for managing the process of safeguarding children supervision.
- Supervisors will take the lead on drawing up, in discussion with the supervisee, the supervision agreement
- Professionals carry the final accountability during the supervision process for decision making.
- Supervisors are responsible for ensuring, in conjunction with their managers, that they are appropriately qualified to provide supervision, are in receipt of appropriate continual professional development and are provided with their own regular supervision.

### **Supervisees**

- The supervisee is responsible for negotiating the supervision ground rules with the supervisor, preparing information for the supervision session in advance and ensuring that the relevant documentation is completed.
- The supervisee is responsible for ensuring that the records are available for any individual/family to be discussed at the supervision session
- The supervisee is responsible for ensuring that the plans formulated during supervision are adhered to and that targets set are achievable and realistic.

### **Supervisors and Supervisees**

- Both supervisors and supervisees are responsible for ensuring that they access mandatory and relevant safeguarding children education and training.
- They are also responsible for ensuring that the National guidance, Pan West Midlands and Local Safeguarding Board interagency procedures and the Trusts Safeguarding Policies are being consulted and used.
- Supervisors and supervisees are responsible for ensuring that practitioners are working in partnership with both adult and children's health care professionals as appropriate and that they work together using a multi-agency and as well as multi-disciplinary approach
- A safeguarding supervision summary sheet must be completed for each case discussed and revisited at the following supervision session, which is to be retained by the supervisor
- Both supervisors and supervisees are responsible for ensuring that all supervision sessions are recorded in the client/patient records. For individual cases discussed, all actions and decisions agreed are to be documented and the records are countersigned by both.

## **8.0 SCOPE OF POLICY**

- 8.1 This policy applies to all staff within the CCG who delivers or receives safeguarding supervision.

## **9.0 PROCESS FOR MONITORING COMPLIANCE WITH THE POLICY**

- 9.1 The CCG Designated Nurses will maintain a database of all supervision received and delivered to confirm that supervision is being completed and standards are being met. An audit of documentation will be undertaken by the safeguarding team to ensure quality of supervision sessions and a similar audit will be requested from all provider organisations through the Safeguarding Quality and Review Meetings.

## **10.0 BIBLIOGRAPHY**

Children Act 1989. London: HMSO

Children Act 2004. London: HMSO

The Open University (1998) Clinical Supervision: A Development Pack for Nurses. London.

Department of Health, Department for Education and Employment and Home Office (2000). Framework for the assessment of children in need and their families. London: The Stationery Office.

Department of Health and Department for Education and Skills (2004). National Service Framework for Children, Young People and Maternity Services. London: Department of Health.

Every Child Matters (2003). London: The Stationery Office.

HM Government (2015). Working Together to Safeguard Children. London: The Stationery Office.

HM Government (2007). Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004. London: Department of Education and Skills.

Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (2015) London: HM Gov.

Morrison T. Staff Supervision in Social Care: Making a real difference for staff and service users. (2005) Brighton: Pavilion

RCPCH (2014) Intercollegiate Document: Safeguarding Children & Young People: Roles and Competences for Health Care Staff. London: RCPCH

RCN and RCPCH (2015) Looked After Children: Knowledge, skills and competences of health care staff. Intercollegiate Role Framework. London: RCPCH

The Care Act (2015) London HMSO

The Victoria Climbié Inquiry Report (2003). London: The Stationery Office  
Working Together to Safeguard Children (2015) London: HM Gov

## **SAFEGUARDING SUPERVISION RECORD (INDIVIDUAL)**

NAME OF SUPERVISEE:

POST TITLE:

WORK BASE:

NAME OF SUPERVISOR:

DATE OF SUPERVISION SESSION:

VENUE:

DURATION:

TOPICS DISCUSSED:

OUTCOMES/ACTION PLANS:

EVALUATION: (HOW USEFUL WAS THE SESSION? WHAT WAS LEARNT?)

COMMENTS:

## **SAFEGUARDING SUPERVISION RECORD (GROUP)**

NAME OF SUPERVISOR:

NAME OF GROUP ATTENDEES:

DATE OF SUPERVISION SESSION

VENUE:

DURATION:

TOPICS DISCUSSED:

OUTCOMES/ACTION PLANS:

EVALUATION: (HOW USEFUL WAS THE SESSION? WHAT WAS LEARNT?)

COMMENTS:

**AD HOC SUPERVISION/ADVICE**

<b>DATE</b>		<b>TIME</b>	
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<b>NAME OF MEMBER OF STAFF</b>	
<b>BASE/CONTACT DETAILS</b>	
<b>Previous contact with Team? Yes/No</b>	<b>Previous advice from –</b>  <b>Date -</b>
<b>Own caseload/covering (delete as applicable)</b>	

**FAMILY PROFILE**

<b>MOTHER</b>		<b>DOB</b>	
<b>FATHER</b>		<b>DOB</b>	
<b>CHILD/SIBLINGS</b>	<b>DOB</b>	<b>SCHOOL/NURSERY</b>	<b>NHS NUMBER</b>
<b>GP</b>			
<b>PRESENT ADDRESS</b>			
<b>POSTCODE</b>			

**NATURE OF CONCERN/QUERY**

Tick as appropriate

<b>Neglect</b>		<b>Physical</b>		<b>Sexual</b>	
<b>Emotional</b>		<b>Unexplained injury</b>		<b>Domestic Abuse</b>	

Alcohol abuse		Substance misuse		Social Inclusion	
Schedule / Offender		Vulnerable family		Mental Health Child/carer	
Learning disability child/carer				Other ( <i>Please state</i> )	

**Concerns**

**Action/Advice**

**NAME** \_\_\_\_\_ **DATE** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ **DESIGNATION** \_\_\_\_\_

## SAFEGUARDING SUPERVISION CONTRACT

Contract between: ----- [Supervisee]  
[Supervisor] -----

Date contract agreed: -----

Frequency of meetings:

Duration of meetings:

Location of meetings:

Purpose:

Ground rules/Parameters agreed e.g.

- confidentiality and conditions under which this would be breached.
- commitment to attending.
- what information can be shared –where, why, who with.
- respect for one another.

Roles and responsibilities e.g.

- supervisee responsible for bringing issues to supervision to explore.
- supervisor responsible for managing time, facilitating exploration of issues presented.
- both responsible for turning up on time.
- agree what arrangements are for cancelling/re-arranging etc.,]

Note Keeping e.g.

- will any notes be kept? [in addition to required Record Sheet]
- what kind? – process notes, bullet points, key themes.
- who 'owns' them? [supervisee]
- who will keep them?
- where will they be kept?

Date for review of contract.

Signed. ----- [Supervisee]  
----- [Supervisor]

Date. -----