



Department of

**Health, Social Services  
and Public Safety**

[www.dhsspsni.gov.uk](http://www.dhsspsni.gov.uk)

AN ROINN

**Sláinte, Seirbhísí Sóisialta  
agus Sábháilteachta Poiblí**

MÁNNYSTRIE O

**Poustie, Resydènter Heisin  
an Fowk Siccar**

*HSS(OSSPOL/RIT)1-2008*

# **Supervision Policy, Standards, and Criteria**

## **Regional Policy for Northern Ireland Health and Social Care Trusts**

**February 2008**

## **ACKNOWLEDGMENTS**

This document was written by NSPCC Consultants Richard Green and Jenny Myers on behalf of the Reform Implementation Team (RIT) as a follow up to the Child Protection Inspection published by the Social Services Inspectorate in January 2007.

We should like to express our gratitude to the RIT Workstream Members for their assistance and critical feedback in the production of this document:

**Niall Young (Chair)**

**Barbara Campbell**

**John Growcott**

**Deirdre Webb**

**Jonathon Giles**

**Karen O'Brien**

**Kate Mooney**

**Ruth Browne**

**Sheila Dwyer**

## **FOREWORD**

This policy is applicable to staff working in children's services in Health and Social Care Trusts. However, it has wider applicability and HSC Trusts and other agencies may wish to consider how it may be utilised with their staff.

The policy reflects the required management of records at a particular point in time. However, it is acknowledged that this is a changing environment and that Health and Social Care Trusts will gradually move from a paper based administrative system to an electronically based system as a result of new investment and IT systems development.

Interpretation of the policy should acknowledge these changes and these will be overseen by the Reform Implementation Team. A formal review of the policy will be undertaken 12 months after the date of issue.

### **Equality**

**This report can be made available on request, on disk, in large print, via email, in Braille, on audiocassette or in minority languages for anyone not fluent in English.**

## **CONTENTS**

<b>1 Supervision Policy</b> .....	<b>4</b>
1.1 Introduction.....	4
1.2 Aims .....	4
1.3 Scope .....	4
1.4 Definition and Functions .....	5
1.5 Literature/ Research.....	5
1.6 Core Values and Principles .....	6
1.7 Responsibilities .....	6
1.8 Methods.....	7
1.9 Knowledge and Skills Framework .....	7
1.10 Quality Standards.....	8
1.11 Confidentiality.....	8
1.12 Recording .....	8
1.13 Quality Assurance/ Audit .....	9
<b>2 Supervision Standards and Criteria</b> .....	<b>10</b>
Standard 1 .....	10
Standard 2.....	10
Standard 3.....	11
Standard 4.....	11
Standard 5.....	12
Standard 6.....	12
Standard 7.....	13
Standard 8.....	13
Standard 9.....	14
Standard 10.....	14
Standard 11.....	15
Standard 12.....	15
<b>3. Appendix 1 - Draft Supervision Agreement</b> .....	<b>16</b>
<b>4. Appendix 2: Supervision Record Pro-Forma (a)</b> .....	<b>19</b>
<b>5. Appendix 2: Supervision Record Pro-Forma (b)</b> .....	<b>22</b>
<b>6. Appendix 3: Case File Audit Sheet</b> .....	<b>23</b>
<b>7. Appendix 4 – Supervision Audit Tool</b> .....	<b>25</b>

# **SUPERVISION POLICY, STANDARDS, AND CRITERIA**

There are three sections to this document:

1. Policy.
2. Standards.
3. Supporting Documents.

## **1 Supervision Policy**

### **1.1 Introduction**

This policy sets the framework and minimum standards for Health and Social Care Trusts to implement an effective and consistent approach to child care supervision practice.

Supervision and appraisal are the most important ways of ensuring staff deliver a high standard of service to children and families, carry out their duties according to policy and procedures and meet departmental and corporate targets. Supporting staff through supervision improves working practices and contributes to better service delivery and outcomes for children.

This policy applies primarily to all children's services staff within the five Trusts (see Scope – 1.3 below).

### **1.2 Aims**

The aims of this policy are to define:

- The uniform supervision model to be adopted for all posts within children services in order to support high quality practice and develop the professional competencies of all those involved.
- The rights and responsibilities of all staff in respect of supervision.
- The standards to be met.
- The means by which the practice of supervision will be qualitatively assessed and monitored.

### **1.3 Scope**

This is a mandatory policy. It applies to the supervision of all children's services staff within the five Trusts, including:

- All children's services social work staff (including social workers, social workers on assessed year in employment).
- Principal practitioners.
- Senior practitioners.
- Team managers.
- Assistant and principal social workers.
- Senior managers.

All Trusts will need to consider how this policy and standards might be applied to other staff e.g. in multi disciplinary teams, adult care, administrative staff and other managers who work with children and families.

## **1.4 Definition and Functions**

Morrison (2001) defines supervision as:

*'a process in which one worker is given responsibility by the organisation to work with another worker(s) in order to meet certain organisational, professional and personal objectives.'*

The aim of supervision is to improve the quality of work in order to optimise service users' capacity to lead independent and fulfilling lives.

The functions of supervision are:

- Management (ensuring competent and accountable performance)
- Development
- Support
- Engagement (engaging the individual with the organisation).

## **1.5 Literature/ Research**

There is now a substantial body of literature and research into the practice of supervision within social care that demonstrates that in many cases supervision has not met minimum standards or been of the requisite quality. A key theme is that of the four functions (see above) the management function takes precedence over the others, especially the development and support functions – with the unfortunate consequence that the latter two functions are given insufficient attention. This is a significant shortcoming as a competent and confident workforce is central to the provision of quality services and to the efficient operation of children's services. In addition few social care organisations have audited supervision to ensure that it is of the requisite frequency and quality.

The DHSSPSNI regional child protection report (2007) made similar observations including there being:

- Inconsistencies in the frequency and quality of social work supervision.
- Few formal processes whereby senior managers agreed targets for supervision.
- Little evidence of alternative arrangements being made where supervisory arrangements were disrupted e.g. managers were on sick leave.
- A weakness in helping social workers to apply theoretical concepts and models.
- Inconsistent recording of decisions made in supervision.
- Little formal auditing of supervision.

## 1.6 Core Values and Principles

These are the core values which underpin the policy and the following standards and criteria (Some have been adapted from Morrison 2001).

1. Supervision must ensure the effective management of practice, develop and support staff and promote their engagement with the organisation.
2. The quality of supervision has a direct bearing on the quality of service delivery and children's outcomes.
3. All staff, irrespective of their role, have the right to receive high quality supervision.
4. All staff bear responsibility for the quality of their own work and, to this end, should prepare for and make a positive contribution to the supervisory process. They are not passive recipients.
5. Senior managers have a responsibility to promote good supervision by implementing this policy and ensuring training is provided for both supervisors and supervisees.
6. Senior managers need to conduct regular audits to ensure that this policy and standards are being implemented.
7. Supervision must promote anti discriminatory practice.
8. All practice must be consistent with the Northern Ireland Social Care Codes of Conduct.

## 1.7 Responsibilities

Supervision is a process not an event. It entails preparation, open discussion and the implementation of decisions. Both supervisors and supervisees have a responsibility to contribute positively to this process. Supervisors should ensure adherence to the standards outlined in this policy.

Supervisees will make a substantial contribution to the quality of their own supervision by, for example:

- Ensuring that actions agreed within supervision are carried out in a timely manner.
- Notifying the supervisor of any difficulties in implementing decisions or plans.
- Identifying development and support needs.
- Understanding and implementing policy.

Where the supervisee is a practitioner s/he will also contribute to the supervision process (and promote high quality service delivery) by, for example, ensuring that:

- There is a written plan for each child.
- The desirable outcomes for each child are defined, including the purpose of contact and agreed interventions, and progress measured against these.
- Case files contain clear analysis, plans and summaries.
- Diversity is integrated into all work and records.

Supervisors will make a substantial contribution to the quality of supervision by adhering to the standards set out in section 2.

Neither supervisors nor supervisees are likely to maximise the benefit of supervision unless they are adequately trained to understand and carry out their duties. Supervision must be integrated into induction processes and training must be provided.

## **1.8 Methods**

The principal method of supervision within the Trusts is one-to-one supervision – where one worker is given the responsibility to work with another worker to meet certain organisational, professional and personal objectives. Supervision as defined in this policy should operate at all professional levels in the organisation up to assistant director level.

However, it may be unrealistic to expect one-to-one supervision to meet all four functions for all staff all of the time. It is, therefore, appropriate to use other methods of supervision. These include group supervision, team supervision and mentoring by Senior Practitioner or the use of other expertise and skills.

In Residential Units in particular the above methods may have relevance. Given that the work often takes place in a group setting and the observations of skills and competence is inherent in the work, the workplace itself can be an evidence base for supervision. In utilising these other methods it remains essential that residential Social Workers have access to a level of one to one supervision on a monthly basis. It is acknowledged that, with the other opportunities available, this may be of shorter duration. The guiding principle, irrespective of which methods are used, is that the line manager is responsible for ensuring that all four functions of supervision are formally addressed.

## **1.9 Knowledge and Skills Framework**

All staff in Health and Social Services are now required to complete the Knowledge and Skills Framework (KSF) Performance and Development Joint Review on an annual basis.

The KSF Performance Review provides an opportunity for the staff member to reflect on their knowledge, skills and values in a structured way, focusing on the knowledge and skills required for their job profile. The line manager completes the performance review form at this meeting. Individuals will be assessed on their examples of practice and the social worker and team manager will need to identify the most relevant examples in order to meet the requirements.

It has been agreed by the Northern Ireland Social Care Council (NISCC) that this KSF Performance Review form may be used for meeting the post registration requirements for NISCC. The Personal Development Plan (page

8 of the KSF Performance and Development Joint Review) will suffice as the Training Plan required for the NISCC post registration requirements (Training and Learning Plan). Social Workers can photocopy the Personal Development Plan and put this in their NISCC folder, to be presented to the NISCC on request.

## **1.10 Quality Standards**

The Quality Standards for the Health and Personal Social Services (HPSS in Northern Ireland) identifies corporate leadership and accountability as key themes for all health and social care organisations.

The standards state that “HPSS organisations and professionals must provide effective leadership and clear direction to make the most of its people, skills, time and money so as to deliver safe, sustainable and high quality services in health and social care”.

The ability of the organisation to reach and maintain the standard will be dependent on the workforce and the opportunities for support and continuous improvement.

A key component which will measure the quality of services provided is staff supervision. Supervision provides an opportunity to reflect on standards of practice and also consider the needs of the individual in terms of support and continuous professional development. This is prescribed within the following standards.

## **1.11 Confidentiality**

Supervision sessions are, in general confidential exchanges between supervisor and supervisee. However, the supervision record is an organisational document which may be seen by others for e.g. audit and inspection purposes, where there are grievances or disciplinary proceedings, without the consent of the parties involved. The supervision agreement should clarify the constraints upon confidentiality. As the keeping of these records involves electronic recording, security access levels will need to be agreed.

## **1.12 Recording**

Supervision should always be recorded in a timely manner and in such a way that the content and decisions can be readily understood and audited.

Written notes should be maintained by the supervisor with a copy for the staff member. Where other staff are providing aspects of supervision/mentoring this should also be recorded.

All notes should be signed as agreed records at the end of a session or beginning of the next (appendix 2(a)). Personal information will only be

recorded where it is causing concern in relation to the individual's work performance. The supervision agreement should state how supervision will be reviewed, including feedback about quality and helpfulness (see appendix 1).

It is the supervisee's responsibility to record any case-related decisions on the case file. They should make it clear with whom they have consulted, especially if a decision is made outside a formal supervision meeting (an 'impromptu' consultation) or involves another manager.

### **1.13 Quality Assurance/ Audit**

Quality assurance is the responsibility of both the first-line manager and senior management.

The first-line manager should read a sample of the supervisee's case records regularly to ensure adherence to policy and the quality of work undertaken. From this s/he should select a number of cases to review in supervision.

Senior managers are also responsible for assuring the quality of supervision and the performance of its staff. To this end they should regularly audit small random samples of case files and supervision records to ensure adherence to policy and the provision of high-quality supervision. Appendix 4 has a template pro forma for this.

It is not realistic for senior managers to review all case/ supervision records. The key is regular audit of small samples – maybe six or eight such records. It may be productive to conduct case records thematically i.e. to examine a sample of files relating to disabled or looked after children or children subject to specific in need or child protection processes.

These processes are described in standard 12 (in addition see the pro forma for case file audit in appendix 3).

## **2 Supervision Standards and Criteria**

Standards are used in many different areas of life. They describe the basic level of performance or ability that is required for a product or service to be effective and do the job it was designed to do.

In this case the standards define what needs to be in place in order for agencies to ensure a consistent approach to supervision at all levels and across the Trusts. Under each standard are a number of criteria – indicators that will help decide whether this standard has been met.

### ***Standard 1***

All staff are provided with formal and regular supervision.

Criteria:

- During their first 6 months of employment staff receive formal supervision, as a minimum, at fortnightly intervals.
- For those staff undergoing the assessed year in employment this standard will apply for 12 months.
- Following confirmation in post practitioners receive formal supervision, as a minimum, at monthly intervals.
- A supervision session lasts on average between one and a half to two hours. In addition time will be needed for preparation and recording.

N.B. The frequencies stipulated in this standard assume staff are in full-time employment. There may need to be adjustment where staff are employed part-time.

### ***Standard 2***

Supervision is arranged and conducted in such a way as to permit proper reflection and discussion.

Criteria:

- Supervision is not subject to cancellation and is only postponed in exceptional circumstances. Any postponed session is reconvened at the earliest opportunity.
- Where the supervisor is absent long-term from work (because of e.g. sick leave) alternative arrangements should be made by senior management to provide supervision.
- Supervision takes place in an environment which affords privacy and where arrangements have been made to avoid interruptions (other than in circumstances described in the supervision agreement).
- Supervisors should follow the protocol for staff debriefing following joint video evidence interviews.

### ***Standard 3***

All supervisory relationships are subject to a written agreement to be drawn up within the first six weeks of the start of the relationship, (see appendix 1).

Criteria:

The agreement addresses:

- Respective roles and responsibilities.
- The frequency of supervision.
- How agendas are to be drawn up.
- How the supervision sessions are to be recorded.
- How confidentiality is to be maintained – and what the limits are to this.
- How KSF performance and development review requirements are to be met.
- How differences in the working relationship are to be managed.
- How the principles of diversity (within the supervisor/ supervisee relationship and in service delivery) are to be handled.
- How and when the agreement is to be reviewed.

### ***Standard 4***

Supervision is a planned and purposeful activity.

Criteria:

- Both supervisor and supervisee prepare for supervision by identifying issues to be addressed.
- An agenda will be drawn up in advance of any supervision meeting. Both supervisor and supervisee may contribute to this.
- Decisions made at the previous supervision meeting are reviewed to ensure actions have been taken, (see appendix 2 pro forma).

There is a further criterion under this standard where the supervisee works directly with children and families. This is:

- The supervisor reads a sample of the supervisee's case records regularly in line with Trust policy. S/he must sign and date the records to indicate they have been read. From this s/he selects a number to review in supervision.

## ***Standard 5***

All supervision sessions should be recorded promptly, competently and stored properly.

Criteria:

- All records relating to cases (whether individual or joint supervision or 'impromptu' discussions) are recorded on the relevant file/pro forma (see appendix 3) by the supervisee, signed by the supervisor other than in exceptional circumstances in 10 working days. The supervisee should place these on the case file.
- Records relating to other matters are recorded on the relevant pro forma, signed by the supervisor and placed on the supervisee's file by the former within, other than in exceptional circumstances, 10 working days. A copy should be handed to the supervisee. This record would normally only be read by more senior management for the purposes of auditing the quality of work and supervision.
- Records demonstrate that issues of diversity have been addressed both in the supervisory relationship and service delivery.
- All supervision records are typed.

## ***Standard 6***

Supervisors and supervisees are trained to carry out their role.

Criteria:

- Induction of all staff addresses the supervision policy and standards.
- Supervisors attend a designated course within 6 months of taking up their first supervisory/ management post.
- Refresher training is available to supervisors (e.g. peer discussions, action learning, critical reflective practice workshops) to consolidate skills and is discussed within the supervisor's annual appraisal.
- Supervisors receive regular feedback from their managers regarding their performance and from supervisees as part of their appraisal process.
- Supervisees attend training in first year in practice to ensure continuing professional development.
- It is likely that there will be a significant training programme required to enable staff to make optimum use of available technology for managing case information, staff-related information and other administrative details.

## ***Standard 7***

The supervisor ensures that the management (competent, accountable performance) function is met.

Criteria:

Supervision meets this function by ensuring that:

- Agency policies and procedures are understood and adhered to.
- The supervisee's workload is managed and priorities are set.
- The quality of the supervisee's performance (including anti-discriminatory practice) is measured.
- Statutory responsibilities are addressed.
- Work is allocated according to the experience and skill of the practitioner and the team's/ agency's business plan.
- Case recording, including daily records are of the requisite standard.
- Case files are audited as per Trust requirements.
- Case plans are devised, implemented, reviewed and recorded on the case file.
- Any advice/consultation on case work given outside formal supervision by the line manager or other manager should be recorded by the supervisee on the file.
- The needs and desirable outcomes of service users are understood; and that risks are identified and countered.
- Appraisals take place, that supervisees have opportunities to meet objectives set in these and that the objectives are reviewed on a regular basis.

## ***Standard 8***

The supervisor ensures that the continuing professional development function (including the post registration training and learning requirement (PRTL) set down by NISCC) is met.

Criteria:

Supervision addresses this function by:

- Helping staff to develop their professional competence.
- Enabling staff to complete the KSF performance and development review.
- Enabling staff to meet their post qualifying and training requirements related to their ongoing registration with NISCC.
- Helping staff to initiate fresh ways of working in response to changing needs, including through the use of technology.
- Enabling staff to relate theory and research to practice.
- Assessing training and development needs.
- Developing skills and knowledge.

- Helping workers to reflect on their work and interaction with service users.
- Providing feedback on performance.
- Discussing knowledge and skills gained in training events and identifying opportunities to integrate these into the supervisee's work.

### ***Standard 9***

The supervisor ensures the support function is met.

Criteria:

Supervision addresses this function by:

- Enabling staff to cope with the stresses that the work entails.
- Offering advice on help available to cope with stress and personal issues.
- Creating a safe climate for workers to examine their practice.
- Helping workers explore the effect of the work on them, both personally and professionally.
- Helping workers explore emotional blocks to the work.
- Monitoring the overall functioning of workers, especially with regard to the effects of stress, team dynamics and relationships.

N.B. It is important to distinguish between support and counselling. Whilst the impact of the work on the supervisee is an appropriate focus of supervision, seeking to resolve the personal problems of the supervisee is not. Staff support services should be easily accessible for all staff.

### ***Standard 10***

The supervisor ensures the engagement (of the individual with the organisation) function is met.

Criteria:

Supervision addresses this function by:

- Communicating effectively with staff about organisational changes and initiatives.
- Briefing management about resource deficits.
- Representing staff needs to management.
- Seeking policy clarification.
- Consulting with staff and feeding back to management on how organisational policies/practice is perceived.
- Arbitrating between team members when required.
- Negotiating on differences which may arise between supervisors and other professionals, teams or services.

## **Standard 11**

Supervision promotes a commitment to diversity in all aspects of work (i.e. that all children and families are entitled to the same quality of service irrespective of ethnicity, religion, language, gender, age, disability or sexual orientation).

Criteria:

Supervision addresses this function by ensuring that:

- All assessments, plans and interventions address the implications of the child's ethnicity etc (see list above).
- The potential vulnerabilities of specific children e.g. disabled/ deaf are identified and countered.
- Discrimination that children may experience is acknowledged and, in so far as this is possible, countered by service provision.
- There is effective communication with all children (this to include e.g. children for whom English is a second language or who are disabled).
- All children receive an appropriate level of protection.
- Children and families receive appropriate services irrespective of ethnicity etc (see list above).

## **Standard 12**

Managers assure the quality of supervision.

Criteria:

- If any functions of supervision are undertaken by a third party, the line manager coordinates the process and ensures effective communication.
- Senior management ensures there is an audit, at least once every 6 months of a small sample of:
  - Case files to track the decision making process, actions and children's outcomes.
  - Supervision records placed on casework files and on supervision files.
- Senior management conducts an annual audit of supervision practice.

### **3. Appendix 1 - Draft Supervision Agreement**

This document should be read in conjunction with the Trust's supervision policy and standards document. All staff you should be given a copy of this. It is designed to help the supervisor and supervisee construct a contract in which expectations are clear. It should act as a template rather than be simply copied. However, in amending it staff should be careful to adhere to the policy and standards.

This contract is between supervisor \_\_\_\_\_ and supervisee \_\_\_\_\_

#### **Frequency, Length and Location**

We will normally meet at \_\_\_\_\_ intervals. Our supervision session will last on average for \_\_\_\_\_. We will meet in a location which is private. Interruptions will be kept to a minimum.

#### **Agenda and Structure**

We will both prepare for supervision by identifying cases/ issues to be addressed. We will notify each other of any major issues to be addressed in advance (in writing if applicable). An agenda will be drawn up at the start of the supervision session.

#### **Functions**

Supervision will cover<sup>1</sup>:

- a) Management (ensuring competent/accountable performance)
- b) Development
- c) Support
- d) Engagement (engaging the individual with the organisation).

#### **Additional requirements for KSF and professional development.**

(The supervisee) has a personal development plan detailing the learning and development taking place in the coming months. This will be addressed in supervision along with any requirements emerging from regulation e.g. assessed year in practice, NISCC continuous professional development.

The KSF review meetings are undertaken separately from supervision sessions.

---

<sup>1</sup> Delete as appropriate according to model of supervision adopted by Trust

(The supervisor) will support the above processes in supervision by e.g.:

- Considering how (the supervisee) is applying his/her knowledge and skills.
- Reviewing progress against the development plan and identifying opportunities.
- Providing feedback around the skills and performance of the supervisee (thus making a transparent and ongoing input into Gateway Reviews).

### **Equalities Issues**

Supervision will be based on anti-discriminatory principles and sensitive to differences between our backgrounds and experiences. We will deal with these differences by \_\_\_\_\_

### **Record Keeping**

All supervision sessions will be recorded on a pro-forma (see appendix 2) by (the supervisor) and passed to the supervisee within stipulated timescales (see policy and standards).

### **Confidentiality**

Personal information will be treated as confidential and not recorded. There are however constraints on confidentiality in that supervision records may be accessed by senior management for e.g. audit and inspection, grievances and disciplinaries.

### **Disagreements**

Areas of disagreement between us will be recorded on the supervision records. In the first instance we will seek to resolve differences within supervision. However, if they cannot be resolved either of us may refer these to the supervisor's line manager.

### **Review of Supervision**

Supervision session process, content, length, frequency, format and style should be reviewed by the supervision and the supervisee on a six monthly basis.

Feedback on the quality of the supervision will be given by (the supervisee) to (the supervisor) by the following method \_\_\_\_\_ (please state frequency too).

**Absence of Supervision**

Trust policy requires that supervision be provided at stipulated minimal intervals. We will only postpone supervision in exceptional circumstances. Should supervision not take place e.g. long-term sickness, failure to adhere to the supervision timetable, we will refer this to (the supervisor's line manager).

**Specific Expectations**

Our expectations of each other are as follows:<sup>2</sup> \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If anyone other than the line manager is going to take responsibility for some part of the supervision process (mentoring, action learning etc) then this should be clearly recorded below and the process specified for regular review and communication.

Signed:      Supervisor \_\_\_\_\_ Date \_\_\_\_\_  
                  Supervisee \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
<sup>2</sup> Record here any expectations which are e.g. not specified elsewhere in the contract, raised by prior positive/ negative experiences etc.

## 4. Appendix 2: Supervision Record Pro-Forma (a)

It is very important that supervision is recorded in a structured way. The following example can be adapted to meet local needs and managers are advised to use them as models when designing their supervision record-keeping system.

Supervision should try and address the following five themes:

- Management (competent and accountable performance)
- Development
- Support
- Engagement (with organisation)
- Caseload weighting

The table below should be used to record briefly what was discussed and any decisions and actions.

When discussing cases only record minimal information on this form. All case decisions and actions should be fully recorded on pro-forma (b) and a copy placed on the child's file.

Record of supervision meeting between \_\_\_\_\_ and \_\_\_\_\_

Date: \_\_\_\_\_ Date of last supervision meeting \_\_\_\_\_

Management and Case Discussion	Action		Caseload weighting
	By Whom	When	

Professional Development	Action		Caseload weighting
	By Whom	When	

Support	Action		Caseload weighting
	By Whom	When	

Engagement	Action		Caseload weighting
	By Whom	When	

Anything else	Action		Caseload weighting
	By Whom	When	

## 5. Appendix 2: Supervision Record Pro-Forma (b)

This form should be used to record any case actions and decisions made in either formal supervision or informal consultation. It does not replace other methods of recording formal decisions such as reviews and planning meetings.

Once completed it should be placed on the childcare file.

<b>CASE SUPERVISION RECORD</b>
<b>Name of child/and or family:</b> _____
<b>Date:</b> _____
<b>Discussion:</b> _____ _____ _____ _____ _____ _____ _____ _____
<b>Decisions and actions agreed:</b> _____ _____ _____ _____ _____ _____ _____ _____
<b>Supervisor:</b> _____
<b>Supervisee:</b> _____

## 6. Appendix 3: Case File Audit Sheet

This form should be used as a tool for first line managers for a random sampling of case files. It does not replace larger audit processes that the Trust may administer.

Service delivery area for audit. (for example disabled children, ethnic minority children, children in need, children looked after or other)

Client Name: ..... File No: .....

Address: ..... Soscare No: .....  
 .....  
 .....

Social Worker: .....

	Yes	No
- Fronting sheet on file and fully completed	<input type="checkbox"/>	<input type="checkbox"/>
- Referral form(s) on file	<input type="checkbox"/>	<input type="checkbox"/>
Referral form(s) signed by Social Worker	<input type="checkbox"/>	<input type="checkbox"/>
Referral form(s) dated by Social Worker	<input type="checkbox"/>	<input type="checkbox"/>
- Personal details all completed	<input type="checkbox"/>	<input type="checkbox"/>
- Evidence that previous history checked	<input type="checkbox"/>	<input type="checkbox"/>
- Referral categorised appropriately	<input type="checkbox"/>	<input type="checkbox"/>
- Referral signed and dated by Senior Social Worker	<input type="checkbox"/>	<input type="checkbox"/>
- SSW ratification and comments completed	<input type="checkbox"/>	<input type="checkbox"/>
- Joint protocol forms completed and on file, if appropriate	<input type="checkbox"/>	<input type="checkbox"/>
- Completed PJ1 signed of by SSW or above	<input type="checkbox"/>	<input type="checkbox"/>
- All relevant forms – UNOCINI, CPR, LAC, Case Planning – on file, signed and dated by SW and SSW	<input type="checkbox"/>	<input type="checkbox"/>
- Daily records signed and dated and filed in order	<input type="checkbox"/>	<input type="checkbox"/>
- All records completed in a legible manner	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No
- Evidence of decision making on file, eg, case supervision/consultation or evidence of SSW auditing file	<input type="checkbox"/>	<input type="checkbox"/>
- Written evidence of statutory visits being undertaken	<input type="checkbox"/>	<input type="checkbox"/>
- Written evidence of child being seen and spoken to	<input type="checkbox"/>	<input type="checkbox"/>
- Evidence of adherence to Policies and Procedures, eg, time scales, etc.	<input type="checkbox"/>	<input type="checkbox"/>
- Evidence that APSW has made the decision to close cases which were formerly on the Child Protection Register (ACPC Policies & Procedures section 6.116 & 6.117)	<input type="checkbox"/>	<input type="checkbox"/>

SSW Comments:

Signature: .....  
 APSW

Date:  
 .....

Date discussed with Social Worker: .....

Social Worker Signature: .....

Copy: client file  
 Social Worker supervision record  
 APSW

## 7. Appendix 4 – Supervision Audit Tool

This tool is designed to assist managers to audit supervision (see standard 12) with a view to establishing whether supervision policy has been adhered to.

It is intended that this tool can generally be completed with reference to supervision notes recorded on the pro forma (appendix 2a) and placed on the supervision file. However, auditing of case-specific supervision records (appendix 2b) will present a fuller picture.

### Standard 1 – Formal and regular supervision

	Yes	Partially	No
Has supervision been provided at the stipulated intervals?			

Comment

--

### Standard 2 – Permitting proper reflection and discussion

	Yes	Partially	No
Was supervision postponed only in exceptional circumstances – and sessions reconvened asap?			
Where the supervisor was absent long-term, were alternative arrangements made?			

Comment

--

### Standard 3 – Written agreement

	Yes	Partially	No
Was a written agreement drawn up within the stipulated timescale?			
Did the agreement address the stipulated issues?			
Has the agreement been reviewed as described in the agreement?			

Comment

--

Standard 4 – Planned and purposeful activity

	Yes	Partially	No
Is there evidence that supervision was planned?			
Were decisions made at the previous session reviewed?			

Comment

--

Standard 5 – Recording and storage

	Yes	Partially	No
Were all records made on the correct pro forma and signed within the stipulated timeframe?			
Do records demonstrate that issues of diversity/ anti-discriminatory practice have been addressed?			
Are all records typed?			

Comment

--

Standard 6 – Training

	Yes	Partially	No
Has the supervisor received training/ refresher training in their role (as outlined in this standard)?			

Comment

--

Standard 7 – Management Function

	Yes	Partially	No
Has the workload been managed and work allocated			

as specified in the standard?			
Has supervision ensured that case plans are devised, implemented, reviewed and recorded?			
Has supervision ensured that outcomes and risks are identified?			

Comment

Standard 8 – Professional Development Function

	Yes	Partially	No
Has supervision provided opportunities to staff to develop their skills, knowledge and competence?			
Have training needs and opportunities been identified?			
Has feedback on performance been provided?			

Comment

Standard 9 – Support Function

	Yes	Partially	No
Is there evidence that the supervisee has received appropriate support?			

Comment

Standard 10 – Engagement

	Yes	Partially	No
Has supervision enabled staff needs to be represented to management?			
Has supervision enabled negotiation of differences (within and outside of the agency)?			

Comment

--

Standard 11 – Diversity/ anti-discriminatory practice

	Yes	Partially	No
Has supervision promoted the integration of diversity principles into assessments, plans and interventions?			
Has supervision helped to identify specific vulnerabilities?			
Has discrimination been acknowledged and (in so far as this is possible) countered by service provision?			

Comment

--

**Equality**

**This policy/proposal has been screened for equality implications as required by Section 75 and Schedule 9 of the Northern Ireland Act 1998, and it was found that there were no negative impacts on any grouping.**

**Human Rights**

**This policy has been considered under the terms of the Humans Rights Act 1998 and was deemed compatible with the European Convention Rights contained within the Act.**