Health Education and Training Institute (HETI)

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HETI takes this opportunity to acknowledge the strong collaboration with Local Health Districts, Specialty Health Networks, the NSW Ministry of Health, NSW Health Pillars and other Public Health Organisations. HETI values the partnerships and expertise of key stakeholders, without which the development of this Framework would not have been possible.

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## Contents

**Acknowledgements** ................................................................. 4

**Section 1: Introduction** ......................................................... 5
- Purpose of the NSW Health Clinical Supervision Framework .......................... 6
- The NSW Health Clinical Supervision Framework ........................................... 7
- Defining clinical supervision ........................................................................... 8
- Key stakeholders ............................................................................................ 10
- Objectives of clinical supervision ................................................................... 11
- Importance of clinical supervision .................................................................. 11
- Models of clinical supervision ......................................................................... 12
- Delivery of clinical supervision ....................................................................... 12
- Supporting safe and high quality patient care ............................................... 13
- The Superguides: their role in facilitating clinical supervision ....................... 14

**Section 2: Principles and outcomes of success** ................................... 15
- Principle 1 ................................................................................................. 17
- Principle 2 ................................................................................................. 17
- Principle 3 ................................................................................................. 18
- Principle 4 ................................................................................................. 19
- Principle 5 ................................................................................................. 19
- Outcomes of success ....................................................................................... 20

**Section 3: References and resources** .............................................. 21
- References ................................................................................................. 22
- Resources ................................................................................................... 23
Acknowledgements

The NSW Health Clinical Supervision Framework (the Framework) was developed by HETI with the involvement and support of many individuals, organisations and professional groups. HETI would like to acknowledge the contribution of the organisations involved in the development of the Framework and the consultation processes. These organisations and groups are listed below.

Contributing Organisations and Groups

- Australasian College of Emergency Medicine
- NSW Health Pillars
- NSW Health Local Health Districts and Specialty Health Networks
- NSW Ministry of Health
- Royal College of Surgeons
- The Royal Australian and New Zealand College of Radiologists
- The Royal Australian and New Zealand College of Psychiatrists
- The Royal Australasian College of Physicians
Section 1: Introduction

The NSW Health Clinical Supervision Framework
Introduction

Effective clinical supervision enables health professionals working across different disciplines including medicine, nursing and midwifery, oral health and allied health, to practice effectively and independently in a complex health system, ultimately enhancing the safety and quality of patient care.

The NSW Health Clinical Supervision Framework has been designed to complement the Superguides developed by HETI and the National Clinical Supervision Competency Resource¹ to ensure a consistent approach to clinical supervision across NSW Health.

The overarching aim of the Framework is to provide guidance to health care services and inform the development of systems in NSW for supporting clinical supervision in practice, to ultimately enhance and maintain the quality and safety of patient care. Principles and outcomes of success are included to support health care services and health professionals, including supervisees and clinical supervisors, to develop and maintain high quality clinical supervision across NSW Health.

Different approaches to clinical supervision reflect the different settings, disciplines and career stages of health professionals. Concerted effort is required to maintain a highly skilled and sustainable health workforce; and to ensure clinical supervision is better understood, accepted and practiced.

A shared vision and understanding of the purpose of clinical supervision is needed, in order to ensure high quality and safe patient care.
The NSW Health Clinical Supervision Framework

Below is a schematic representation of the NSW Health Clinical Supervision Framework. Further explanation and detail on the components of the diagram are provided in the remainder of this document.

PRINCIPLE 1
Clinical supervision is available to all health professionals to optimise patient care and outcomes

PRINCIPLE 2
Clinical supervision supports best practice and consistent delivery of patient care

PRINCIPLE 3
Clinical supervision is high quality and effective in addressing the needs of health professionals

PRINCIPLE 4
Clinical supervision contributes to continuous professional learning and practice improvement

PRINCIPLE 5
Clinical supervision supports high quality care through data collection and monitoring for continuous improvement

Figure 1: NSW Health Clinical Supervision Framework
Defining clinical supervision

Clinical supervision is widely accepted as an essential part of health care systems. It occurs in a variety of settings using different modes of delivery, and is an interpersonal exchange. Various definitions of clinical supervision including models of practice and frameworks for implementation currently exist for health professionals working in different practice settings. These definitions acknowledge that clinical supervision is integral to maintaining the safety and quality of patient care.

Clinical supervision includes:
- reflective clinical supervision
- learning and oversight (both direct and indirect) at point-of-care
- facilitated professional development
- training and education (see Figure 2).

For the purpose of this Framework, clinical supervision is defined as a structured process to:
- support health professionals to reflect on their own practice in a safe, confidential and supportive environment in the provision of quality care
- ensure the safety and quality of patient care through learning and oversight at point-of-care.

Figure 2: Elements of clinical supervision
Reflective practice

One of the most important skills health professionals can develop is the ability to critically reflect on their own practice. Reflection in the context of clinical supervision may occur in day-to-day clinical practice, be triggered by a challenging clinical encounter or be in anticipation of having to manage a complex situation. It is essential that reflective practice is conducted in a supportive, safe and confidential environment to allow supervisees to freely share information that promotes learning.12

Learning at point of care

This is where theoretical knowledge is translated into practice at the patient care interface. Clinical supervisors may use opportunities to teach in the presence of patients by identifying patients from their own case load, or work with a patient from the supervisee’s caseload. Health professionals may refer to principles which can be applied to teach in the presence of patients.12,13,15

Facilitated professional development

Facilitated professional development may involve strategies such as peer review, coaching and mentoring of health professionals.14,15 Peer review encourages health professionals to actively participate in monitoring and improving each other’s practice and enhancing the safety and quality of care. Coaching is aimed at developing specific knowledge and skills and usually involves a collaborative learning and development process. Mentoring involves nurturing and improving health professionals’ skills, through the sharing of expertise and knowledge by experienced staff.
Key stakeholders

A number of stakeholders have a role in supporting and delivering clinical supervision in NSW (Figure 3). The primary audience for the Framework includes health professionals and health services in NSW delivering and receiving clinical supervision, for example Local Health Districts and Specialty Health Networks.

Figure 3: Elements of clinical supervision

* Australian Health Practitioner Regulation Agency
Clinical supervision

Objectives of clinical supervision

Research has shown that clinical supervision is essential for the provision of safe and high quality patient care.4-7 Clinical care is provided by:

► experienced, skilled staff directly to patients
► less experienced staff under a level of clinical supervision that is appropriate for:
  • the patient’s condition and circumstances
  • the level of competence of the health professional providing care.

Best practice clinical supervision supports the development of a professional relationship between the supervisee and their supervisor, choosing a format appropriate to the needs of supervisees.9

The principles and outcomes of success included in the Framework are based on best practice clinical supervision and will support health professionals (supervisees and clinical supervisors) and health services in implementing clinical supervision.

Importance of clinical supervision

Clinical supervision is essential for reducing errors, ultimately leading to improved patient care and safety. Inadequate and/or poorly coordinated clinical supervision of staff is harmful to patients and increases stress and burnout in health professionals.6, 7

Inadequate clinical supervision may lead to acceptance of lower standards of care because health professionals may not be able to contextualise their practice.7

The benefits of clinical supervision include:7-9

► improved patient care and safety
► increase in health professionals’ learning, development of new skills and clinical team building, promoting the delivery of best practice care
► reductions in professional isolation, levels of stress, emotional exhaustion and burnout, therefore improving retention of staff.
Models of clinical supervision

There are different models of clinical supervision, reflecting the differing work context and the professional training needs and expectations of staff, and there is no one model of clinical supervision that will suit all occasions. When determining the clinical supervision model/s to be implemented, consideration should be given to the supervisees and clinical supervisors:

- experience and knowledge
- preference or style of working
- needs and the context of their work.

For some disciplines, specific requirements such as minimum continuing professional development activities exist to maintain professional registration with the Australian Health Practitioner Registration Agency (AHPRA).

Delivery of clinical supervision

Continuous building of knowledge and skills for health professionals occurs through experiences encountered over the course of a lifetime. The process of supervision should continue throughout the health professional’s career, whether they remain in clinical practice or move into management, research or education.

Clinical supervision is a continuum of activities, extending from point of care through to reflective clinical supervision and facilitated professional development. It may occur ‘on the job’, while a practical task is being carried out, formally, informally, in a one-to-one meeting, or through group or peer supervision.

Increasingly, health care is provided by a multidisciplinary team of health professionals. In this context, it is important that health professionals (supervisees and clinical supervisors) involved in the process of clinical supervision have a shared understanding of the roles, responsibilities and purpose of clinical supervision. In certain settings, it may not be practical to appoint clinical supervisors from the same professional discipline as supervisees however, it is essential that clinical supervisors understand their supervisee’s professional role and have the core supervisory skills required to support their supervisees.
Supporting safe and high quality patient care

The fundamental components needed to support safe and high quality patient care through clinical supervision in various clinical/professional settings form four distinct domains (Figure 4). These are:

- **clear concepts and definitions** - foundational building blocks that are required in order to provide clarity and understanding about clinical supervision

- **practical tools and resources** - practical approaches that would support clinical supervision and enhance clinical practice in various settings. See Resources for a list of practical tools and/or resources

- **positive learning culture and respect** - emphasising the importance of two-way feedback, prioritising patient needs and supporting the supervisees in discussing their clinical supervision needs

- **reporting, measuring and monitoring** - clear and structured mechanisms for accurately describing and monitoring clinical supervision practices.

Environmental factors refer to the broader policy and regulatory context in which clinical supervision is undertaken.

The **principles and outcomes of success** outlined in this Framework have been developed considering these areas of activities.

Figure 4: Domains to ensure high quality clinical supervision
The Superguides

The Superguides’ role in facilitating clinical supervision

Allied health\(^1\), oral health\(^1\), nursing and midwifery\(^1\), and medical\(^1\) Superguides are available to support health professionals (supervisees and clinical supervisors) at different stages of their careers, working in different settings. Each HETI Superguide places an emphasis on different aspects of clinical supervision. All highlight the importance of clinical supervision to patient safety and quality of care.

This overarching Framework provides a strategic, aligned and informed approach to clinical supervision, which complements the practical guidance included in the HETI Superguides.

Nursing and Midwifery
Reflection is considered to be a central component of all types of clinical supervision and is essential for safe and high quality patient care.

Allied Health
Clinical supervision ensures delivery of high quality patient care and treatment through accountable decision making and clinical practice. In addition, it facilitates learning and professional development and promotion of staff wellbeing.

Medical
Clinical supervision is about caring for patients, collaboratively, ensuring that the patient receives optimum care.

Oral Health
Clinical supervision is essential in ensuring the promotion of excellence in clinical practice and of patient safety.
Section 2:

Principles and outcomes of success
Principles

Goal of the Framework
To optimise patient care and outcomes achieved through lifelong learning for health professionals

Outcome of the Framework
Contribution to improved patient care and outcomes

This section sets out the principles for clinical supervision in NSW Health. These principles include descriptions of their elements at health professional, health service and health system levels. Outcomes of success are also described.

**Principle 1**
Clinical supervision is available to all health professionals to optimise patient care and outcomes.

**Principle 2**
Clinical supervision supports best practice and consistent delivery of patient care.

**Principle 3**
Clinical supervision is high quality and effective in addressing the needs of health professionals.

**Principle 4**
Clinical supervision contributes to continuous professional learning and practice improvement.

**Principle 5**
Clinical supervision supports high quality care through data collection and monitoring for continuous improvement.
**Principle 1:** Clinical supervision is available to all health professionals to optimise patient care and outcomes

<table>
<thead>
<tr>
<th>Elements</th>
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<tbody>
<tr>
<td>Health Professional</td>
<td>▶ Supervisees are responsible for, and committed to, receiving clinical supervision and ongoing professional development.</td>
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<tr>
<td></td>
<td>▶ Clinical supervisors are committed to ensuring they provide effective clinical supervision.</td>
</tr>
<tr>
<td>Health Service</td>
<td>▶ Health services provide access to clinical supervision at a level appropriate for the supervisee's qualifications, experience and needs.</td>
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<td></td>
<td>▶ Health services provide a strong and measurable commitment to their staff accessing clinical supervision.</td>
</tr>
<tr>
<td>Health System</td>
<td>▶ Access to clinical supervision is included in health workforce programs and guidelines.</td>
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**Principle 2:** Clinical supervision supports best practice and consistent delivery of patient care

<table>
<thead>
<tr>
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<tr>
<td>Health Professional</td>
<td>▶ Health professionals involved in the process of clinical supervision have a shared understanding of the purpose of clinical supervision and their roles and responsibilities.</td>
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<tr>
<td></td>
<td>▶ Supervisees and clinical supervisors are responsible for maintaining appropriate records of clinical supervision sessions.</td>
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<tr>
<td>Health Service</td>
<td>▶ Organisational processes and resources are in place outlining the purpose of clinical supervision.</td>
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<tr>
<td></td>
<td>▶ Organisational governance arrangements are in place to support clinical supervision for all health professionals.</td>
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<tr>
<td>Health System</td>
<td>▶ Health systems play a key role in setting standards for clinical supervision across NSW.</td>
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NSW HEALTH CLINICAL SUPERVISION FRAMEWORK

PAGE 17
# Principles

## Principle 3: Clinical supervision is high quality and effective in addressing the needs of health professionals

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| **Health Professional** | - Clinical supervisors access education and training addressing the core knowledge and skills required to provide effective clinical supervision.  
- Approaches to clinical supervision are tailored to meet the needs of the supervisee and involve conversation between the clinical supervisor and supervisee. |
| **Health Service** | - Clinical supervision programs and policies are supervisee-centred and based on a shared understanding of expected clinical supervision standards.  
- Health services support clinical supervisors to undertake training and encourage them to build on their skills. |
| **Health System** | - Standards for clinical supervision and associated training including education requirements are developed by relevant state, national and health professional bodies.  
- Resources and tools are developed for both supervisees and clinical supervisors, to support high quality clinical supervision. |
**Principle 4:** Clinical supervision contributes to continuous professional learning and practice improvement

**Elements**

| Health Professional | ► Clinical supervision is recognised as an essential component of the health professionals' (clinical supervisor and supervisee) role and is incorporated into their professional development plan.  
  ► Supervisees and clinical supervisors ensure that a professional relationship is developed and maintained promoting a safe learning environment. |

| Health Service | ► Health services support learning and development in a safe and supportive work environment.  
  ► Structured, transparent processes are in place for issues related to patient safety/risk concerns being raised in clinical supervision sessions, to inform service management, development and planning. |

| Health System | ► The benefits of clinical supervision are acknowledged and valued by the health and education sector, particularly as they relate to workforce recruitment, retention and safe clinical practice. |

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**Principle 5:** Clinical supervision supports high quality care through data collection and monitoring for continuous improvement

**Elements**

| Health Professional | ► Collecting and reviewing information from clinical supervision is an essential component of health professionals’ role, to support reflection on their clinical supervision activity. |

| Health Service | ► Health services collect data on the programs of clinical supervision and the models of clinical supervision in place. |

| Health System | ► Providing evidence-based guidance on the continuous evaluation and benchmarking of clinical supervision outcomes, using internationally validated tools. |
Outcomes of success

Outcomes of success have been identified to assist in the review of the implementation of clinical supervision at individual health professional, health service and health system levels. These outcomes include:

- Health professionals are receiving clinical supervision at appropriate times to ensure high quality and safe patient care.
- The process of providing feedback, usually through conversations, is embedded into routine practice.
- Clinical supervisors have an opportunity to supervise and develop their clinical supervision skills.
- Supervisees and clinical supervisors seek out employment in NSW Health because of the supervisory environment.
- Supervisees know that clinical supervision has assisted them in their professional development and career progression.
- Clinical care is supervised and is appropriate to patient condition and supervisees’ skills.
- Clinical supervision is included in health professionals’ development plans.
- Resources and tools are available to support high quality clinical supervision.
- Clinical supervision is integrated into health workforce programs.
- Health services use relevant and appropriate data about clinical supervision practices to inform decision-making.
- Health services have mechanisms in place to assess the quality and outcomes of clinical supervision.
- Clinical supervision is viewed as integral to the quality of the health system.
Section 3:
References and resources
References


Resources

Key practical tools and resources relating to clinical supervision which may be used in conjunction with this Framework include:

- **Clinical Supervision Training Space** - HETI’s portal to over 180 clinical supervision training resources which includes all of HETI’s Superguides, videos, web-based resources and face to face training.

- **Clinical Supervision at point-of-care** - This report published by the Clinical Excellence Commission focuses on point-of-care supervision, highlighting the importance of effective leadership, support and guidance on clinical practice to ensure patients receive safe and appropriate care at the bedside.

- **Allied Health Superguide** - HETI’s handbook for supervising allied health professionals.

- **Medical Superguide** - HETI’s guide for supervising doctors.

- **Nursing and Midwifery Superguide** - HETI’s handbook for supervising nurses and midwives.

- **Oral Health Superguide** - HETI’s guide for supervising oral health professionals.