

Sussex and East Surrey Sustainability and Transformation  
Partnership (STP)

# Safeguarding and Looked After Children Supervision Policy

APPROVED BY: QUALITY COMMITTEES

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**Compliance with all CCG policies is a condition of employment.  
Breach of policy may result in disciplinary action.**

## Version Control

<b>Policy Category</b>	Safeguarding	
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1	28/11/2016	Approved at individual CCGS
2	18/01/2018	Policy updated for approval
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## **1. Introduction**

Sussex and East Surrey STP CCGs have a range of systems and processes in place to meet the statutory national and local obligations for Safeguarding and Looked After Children. This includes arrangements for Safeguarding and Looked After Children supervision.

Supervision is fundamental to good Safeguarding practice for those working with children or adults at risk and should therefore lead to better outcomes for people who need care and support. It should be an integral part of an organisation's culture, recognising that the culture is what establishes the tone, values and behaviours that are expected from every employee. Supervision should be used as an opportunity to challenge practice constructively, and to identify any barriers to effective practice – not simply to check compliance with procedures.

All NHS Services are required to fulfil their legal duty under Section 11 of the Children Act (2004), The Care Act (2014) and statutory responsibilities as set out in Working Together to Safeguard Children (WTTSC 2015 & 2018). Therefore, Safeguarding and promoting the welfare of children must be an integral part of the care offered by all health care professionals working within the CCG. This may be care offered to children, young people, families and adults.

## **2. Purpose**

The purpose of this policy is to provide guidance on the implementation and process of supervision within the context of Safeguarding adults and children and Looked After Children and identify the CCG's responsibilities for the provision of effective supervision for clinical staff.

Supervision Aims:

- Keep focused on the patient/child and other adults they may be in contact with
- Maintain a degree of objectivity and challenge fixed views
- Assess the evidence base for assessment and decisions
- Explore the emotional impact of work

## **3. Scope**

The policy is applicable for those staff working within the STP who have regular contact with children or adults at risk, to enable them to have the opportunity for regular, formal, documented supervision by a trained supervisor. This scope includes the supervision of named leads within provider organisations from the relevant designated nurses. This will include CHC teams and Safeguarding and Looked After Children leads within independent providers and access to ad hoc supervision for members of the quality and patient safety teams.

## 4. Definitions

**Safeguarding Supervision** is a formal process of professional support and learning that enables individual practitioners to develop knowledge and competence, assume responsibility for their own practice, and enhance patient protection and safety of care in a wide range of situations. It is central to the process of learning.

**Adult (at Risk)** is defined by the Care Act 2014 as anyone over the age of 18 who has care and support needs (whether or not the local authority is meeting any of these needs), the adult is experiencing, or at risk of, abuse or neglect and as a result of their care and support needs, the adult is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

**A child** is anyone who has not yet reached their 18th birthday. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change his/her status or entitlements to services or protection.

**Looked After Child** this term is used to describe any child who is in the care of the local authority or who is provided with accommodation by the local authority social services department for a continuous period of more than 24 hours. This covers children in respect of whom a compulsory care order or other court order has been made. It also refers to children accommodated voluntarily, including under an agreed series of short-term placements which may be called short breaks, family link placements or respite care, as well as those who are on remand.

## 5. Roles and Responsibilities

### 5.1. Organisational

STP CCGs have a responsibility to ensure the organisation meets the Safeguarding and Looked After Children obligations. This includes systems and processes for staff supervision. Ensure that those practitioners providing supervision are adequately trained in supervision skills and have up to date knowledge of the relevant legislation, guidelines and research and promoting the welfare of children and adults.

This must reflect the requirements set out in Working Together (2018), the Intercollegiate Documents (Adults 2018, Children 2019, Looked After Children 2015), Statutory Guidance on Promoting the Health and Well-being of Looked After children (DoH, DfE 2015), the STP Safeguarding Policy and Sussex Adult and Child Policy and Procedures.

### 5.2. Controlling behaviour

The designated safeguarding nurses provide strategic, professional and clinical leadership relating to the Safeguarding of adults and children across the STP footprint. This includes providing Safeguarding supervision within STP CCGs and provider organisations.

The designated Nurses for Looked after children provide strategic, professional and clinical leadership for looked after children across the STP footprint. This includes supervision for the named nurses for looked children.

### **5.3. Individual Accountability**

The process of supervision is underpinned by the principle that each practitioner remains accountable for his/her own practice and as such his or her own actions within supervision. Safeguarding supervision does not replace nor should it delay the individual's responsibility to refer concerns that a child/adult may be at risk of significant harm. In such cases staff should refer to the Sussex Safeguarding Children procedures.

### **5.4. Supervisor's Responsibilities**

- Ensure they are trained in supervision skills and have up to date knowledge of the legislation, policy and research relevant to Safeguarding and Looked After Children and promoting the welfare of children or adults at risk.
- They are accountable for the advice they give and the actions they take.
- That staff receiving supervision have signed a contract with their supervisor.
- They acknowledge when they do not have the skills or knowledge to safely address an issue raised and to redirect the supervisee accordingly.
- Discuss management of individual cases to explore and clarify the management and thinking relating to the case.
- Provide clear feedback to the supervisee and identify who is responsible for implementing any required actions resulting from the supervision.
- Share information, knowledge and skills with the supervisee.
- If required, constructively challenge personal and professional areas of concern.
- Document the agreed summary of the discussion with a clear action plan indicating responsibility for each action. A copy should be held securely by the professionals.

### **5.5. Supervisee's Responsibilities**

The supervisee has a responsibility to ensure that they receive the most effective and timely support, this includes:

- Agree, sign and adhere to the supervision contract
- Identify and prioritise issues/cases to be discussed to develop and improve practice as a result of supervision, identifying any training needs.
- Identify issues for exploration and improvement of practice.
- Be prepared for constructive feedback/challenge, develop skills in reflective practice.
- To take responsibility to ensure they receive Safeguarding supervision.

- Request timely advice and support from the designated nurses.
- Maintain accurate, meaningful and contemporaneous records and documentation.

## **6. Aims of Safeguarding Supervision**

The primary aims of supervision are:

- To ensure professional practice remains child/patient focused and promotes patient choice.
- To ensure understanding of consent and information sharing including best interest for individuals who lack capacity to make their own decisions about safeguarding issues.
- To ensure the practitioner fully understands their role, responsibilities and scope of their professional discretion and authority.
- To allow the practitioner to explore and develop ways of working openly and in partnership with other agencies.
- To allow practitioners to discuss strategies in order to prevent children or adults at risk from suffering harm.
- To create an opportunity for the practitioner to reflect and discuss individual practice and organisational issues that may impact on their practice.
- To enable and empower the practitioner to develop skills, competence and confidence in their practice.
- To provide a forum for the practitioner to discuss the emotional impact on their working within Safeguarding children/adults, or with Looked After Children .

## **7. Outcomes of Supervision**

The aims of supervision are to achieve the following outcomes:

- To ensure the professional practice remains child/patient focused, ensuring the holistic needs of children or adults are paramount.
- To ensure practitioners are aware of and comply with relevant legislation and have a clear understanding of their role and responsibilities when working with children/ vulnerable adults.
- To allow practitioners the opportunity to recognise their own values, beliefs and prejudices and work to ensure that these do not adversely impact on their ability to work with individuals to keep children & adults at risk safe.
- To ensure the practitioners response to Safeguarding children/adults concerns is appropriate and in the best interests of the individual.
- The practitioner to ensure they do not discriminate against individuals because of age, gender, race, culture, religion, language, disability or sexual orientation.
- The practitioner to work in partnership with carers and families, respecting rights for privacy and dignity.

## **8. Confidentiality**

Both group and 1:1 supervision is a confidential process and it should take place in a private venue with uninterrupted time. The sessions will be confidential except where there is a risk to the safety and wellbeing to a child or adult at risk. Advice given should be documented on a Supervision Record. If concerns arise with regard to professional competence of the supervisee or supervisor during supervision, either party should feedback to the other at the end of the session and both professionals should endeavour to resolve the issue. If it cannot be resolved at this level then senior Safeguarding and Looked After Children professionals should be asked to facilitate resolution.

Within group supervision cases can be discussed anonymously. It is the responsibility of the practitioner and supervisor to follow up in a 1:1 format as needed. During 1:1 Supervision the process is confidential and the supervisor will allow time for the practitioner to reflect on and learn from mistakes and rectify them. In cases where issues are resolved within the Safeguarding and Looked After Children Supervision process the information will not be shared with the line manager. Where there are on-going concerns about a supervisee's practice and/or their refusal to comply with the supervisors recommendations, the supervisee will be informed that their line manager/senior manager will be contacted for resolution.

## **9. Documentation**

A copy of a signed Supervision Contract should be kept securely by the supervisor and supervisees. The supervisor and supervisee will agree how and where the supervision records will be stored.

## **10. Format**

### **10.1. One to one**

1:1 Safeguarding and Looked After Children supervision should be held between agreed parties at least quarterly. It will be held in a suitable, private venue, with protected and uninterrupted time. It is the responsibility of the supervisee to arrange this session and prepare for it. It is the responsibility of the supervisee to request additional 1:1 supervision should a case warrant closer scrutiny.

### **10.2. Group Supervision**

Group supervision will be held at least three monthly for staff members who require it, such as the CHC team/Complex Case Manager for Children. Staff are required to attend no less than two group sessions per year. It will be held in a suitable, private venue, with protected, uninterrupted time. It is the responsibility of the CHC Team Leader/s to arrange group supervision with the designated nurse and communicate this to the team. The agenda and

subjects for discussion should be predetermined however late changes can be made if required. The meeting can be used for Safeguarding updates however there must be protected time within the meeting for case discussion and supervision.

### **10.3. Ad hoc Supervision**

All practitioners within the CCGs, who have irregular contact with children or adults at risk, shall have access to ad hoc supervision by a Safeguarding and Looked After Children lead when requested. This will be arranged on a case by case basis, the same contract and documentation requirements as for regular supervision will apply. It will be held in a suitably private venue with uninterrupted time. It is the responsibility of the individual or their team manager to request supervision; this can be 1:1 or group.

## **11. References**

Pan Sussex Safeguarding and Looked After Children Policy & Procedures:  
<http://sussexSafeguardingandLookedAfterChildrenadults.procedures.org.uk>

[www.sussexchildprotection.procedures.org.uk](http://www.sussexchildprotection.procedures.org.uk)

The Care Act (2014) London: HMSO

Safeguarding and Looked After Children Vulnerable People in the NHS –  
Accountability & Assurance Framework (2015): NHS England

Department for Children, Schools & Families (2018), Working Together to Safeguard Children: a guide to interagency working to safeguard and promote the welfare of children. Stationary Office, London.

Safeguarding children and young people: roles and competencies for health care staff (2019)

Statutory Guidance on Promoting the Health and Well-being of Looked After children (DoH, DfE 2015)

Looked After Children: knowledge, skills and competence of health care staff  
Intercollegiate Role Framework (RCN, RCPCH 2015)

Children Act (1989) London: HMSO

Children Act (2004). London: HMSO

Children and Social Work Act (2017)

## **12. Equality**

In applying this policy, the CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, sex, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

## **13. Mechanism for review**

This policy will be reviewed as part of the usual policy cycle. Where review is necessary due to legislative change, this will happen immediately.

## Appendix 1: Supervision Contract.

### Supervision Contract.

<b>This contract was drawn up on (date):</b>	
<b>Between Supervisee:</b>	
<b>and Supervisor: (print names)</b>	
<b>A copy of this contract will be held by both the Supervisor and Supervisee. This contract will change as and when necessary and with prior consultation.</b>	

<b>Frequency / Length.</b>
<ul style="list-style-type: none"> <li>Supervision sessions will be held every 8/12 weeks.</li> </ul>
<ul style="list-style-type: none"> <li>A minimum of one hour will be available. If a supervision session is missed, the Supervisor takes responsibility to rearrange an alternative date as soon as possible.</li> </ul>

<b>Confidentiality.</b>
<ul style="list-style-type: none"> <li>The Supervisee accepts that work issues may be discussed, when appropriate, with other managers.</li> </ul>
<ul style="list-style-type: none"> <li>The Supervisee is entitled to have issues concerning the quality of his / her work to be overt and open to his / her involvement.</li> </ul>
<ul style="list-style-type: none"> <li>The Supervisee and Supervisor are to inform each other of anything that needs to be kept confidential.</li> </ul>
<ul style="list-style-type: none"> <li>The Supervisee accepts that their supervision records will move with them in the event of transfer of Supervisor.</li> </ul>

<b>Supervisee's Rights.</b>
<ul style="list-style-type: none"> <li>To uninterrupted time in a private venue.</li> </ul>
<ul style="list-style-type: none"> <li>To Supervisor's attention, ideas and guidance.</li> </ul>
<ul style="list-style-type: none"> <li>To receive feedback.</li> </ul>
<ul style="list-style-type: none"> <li>To set part of the agenda.</li> </ul>
<ul style="list-style-type: none"> <li>To ask questions.</li> </ul>
<ul style="list-style-type: none"> <li>To expect Supervisor to carry out agreed action or provide an appropriate explanation,</li> </ul>

within an agreed time frame.

- To state when over / under worked.
- To have their development / training needs met.
- To challenge ideas and guidance in a constructive way.

### **Supervisee's Responsibilities.**

- To be proactive.
- To have a predominantly problem solving approach.
- To accept feedback positively.
- To update the Supervisor and provide relevant information.
- To prepare for supervision, and to keep their copy of the supervision record in a secure location.
- To bring issues, concerns and problems.
- To maintain the agreement.
- To identify development / training needs and engage in agreed activities.

### **Supervisor's Rights.**

- To bring concerns / issues about the Supervisee's work.
- To question the Supervisee about their work and workload.
- To give the Supervisee constructive feedback on their work performance.
- To negotiate around Supervisee's work / workload.
- To observe Supervisee's practice and to initiate supportive / corrective action as required.

### **Supervisor's Responsibilities.**

- To make sure supervision sessions happen as agreed and to keep a record of the meeting.
- To create a supervision file for each Supervisee containing their supervision records and other documents relating to their employment and development.
- To ensure that Supervisee is clear about their role and responsibilities.
- To record the supervision session and to store their copy in the supervision file.

- To monitor Supervisee's performance.
- To set standards and assess the Supervisee against these.
- To know what Supervisee is doing and how it is being done.
- To deal with problems as they impact on the Supervisee's performance.
- To support Supervisee and the agreed personal development plan.

**Conflict.**

- Every effort should be made to resolve any conflict, within supervision.
- In exceptional circumstances, where this cannot be achieved, the Supervisee has recourse to the Supervisee's Line Manager.

**Recording Mechanisms.**

- The Supervisor and Supervisee agree notes of the session, which should be signed and dated, using the pro-forma provided.

<b>Signed by: (Supervisee)</b>		<b>Date:</b>	
<b>Print name:</b>			
<b>Signed by: (Supervisor)</b>		<b>Date:</b>	
<b>Print name:</b>			



## Appendix 2: Individual Supervision.

### Individual Supervision.

<b>Name of Adult or Child :</b>			
<b>Date of contact:</b>		<b>Date of Birth:</b>	
<b>Details of any children or other adults in the family who may be at risk:</b>			
<b>Any Child/adult Safeguarding and Looked After Children Concerns / referral to Children's/adult services:</b>			

<b>Date of previous supervision:</b>	
<b>Evaluation of any previous Action Plan:</b>	

**What are we concerned about?**

**Background risk Factors:**

**Yes / No**

**Current Risks or concerns:**

**Consider issues regarding:**

- mental capacity.
- making Safeguarding and Looked After Children personal.
- is the matter a crime.

**Impact on the adult /child/ family / wider community:**

**Points to consider:**

- purpose.
- engagement.
- difficulties.
- duration.
- development.

**Overview of your current involvement:**

**What is working well? Strengths and protective factors:**

<b>Action Plan:</b>		
<b>Smart Objectives:</b>		<b>Completion:</b> <b>Date:</b>
<b>Goals:</b>		<b>Completion:</b> <b>Date:</b>
<b>Who is responsible:</b>		

<b>Signed by: (Supervisee)</b>		<b>Date:</b>	
<b>Print name:</b>			
<b>Signed by: (Supervisor)</b>		<b>Date:</b>	
<b>Print name:</b>			

**Group Supervision Safeguarding and Looked After Children Record and Contract**

<b>Supervisor(s)</b>	
<b>Staff/locality/team/service</b>	
<b>Date</b>	
<b>Venue</b>	
<b>Start time and duration</b>	

**All attendees have read and understood the STP Safeguarding and Looked After Children Policy and Supervision Policy**

**Contract agreed as per policy**

**Ground Rules**

- **Sessions will start promptly and all participants must arrive prior to the agreed start time**
- **Each attendee to receive a copy of group supervision record following supervision**
- **Attendees are responsible for maintaining record of own attendance**
- **Supervisor to retain a copy of session**

<b>Name</b>	<b>Signature</b>	<b>Designation</b>	<b>Secure E-Mail</b>

**Discussion Topics**

**Outcomes/Learning points key themes identified**

**Any Actions for**

- **Individual practitioners**
- **Supervisor**

**Date and venue of next supervision  
Time**