Sample procedure

**[Facility/Service/Clinical Stream name]**

## Purpose and intent

This hospital health service (HHS) promotes a culture of lifelong learning that aligns with Section 12.3 of the Framework for Lifelong Learning for Nurses and Midwives Queensland Health—June 2018: Supporting Relationships to Build Capacity: Clinical Supervision (Queensland Health, 2018, p. 54). The value of clinical supervision for all nurse/midwives is recognised for its contribution to quality care and staff wellbeing.

Clinical supervision is defined as:

‘A formally structured professional arrangement between a supervisor and one or more supervisee(s). It is a purposely constructed regular meeting that provides for critical reflection on the work issues brought to that space by the supervisee(s). It is a confidential relationship within the ethical and legal parameters of practice. Clinical supervision facilitates development of reflective practice and the professional skills of the supervisee(s) through increased awareness and understanding of the complex human and ethical issues within their workplace’.

(Australian College of Midwives, Australian College of Nursing, & The Australian College of Mental Health Nurses inc., 2019, p.2)

## Scope and target audience

The term clinical supervision has several other meanings and applications in healthcare. For the purposes of this document, clinical supervision does not refer to the direct or indirect supervision of a student or a colleague's work practice (including observational assessment), nor does it refer to managerial supervision or mentorship (Australian College of Midwives et al., 2019; Martin et al., 2017; HETI, 2013).

This procedure applies to all nurses/midwives employed within the HHS.

## Principles

As outlined in the Clinical Supervision Framework for Queensland Nurses and Midwives (2021), clinical supervision:

• should be available to all nurses and midwives regardless of their level or role

• requires a trusting alliance between the clinical supervisor and supervisee(s)

• provides a safe and confidential space for nurses and midwives to critically reflect on their practice

• is a supportive, culturally safe process that contributes to the health and wellbeing of nurses and midwives.

Adapted from (Australian College of Midwives et al., 2019)

## Procedure/process

To access clinical supervision, nurse/midwives follow these steps:

1. Attend/view a clinical supervision awareness session on commencement of employment. At this time, nurses/midwives will receive details of the local clinical supervision coordinator, available clinical supervisors and/or available clinical supervision group times.
2. Select a clinical supervisor and/or group clinical supervision of their choice from the list of approved options.
3. Discuss proposed clinical supervision arrangements with their line manager and negotiate attendance details.
4. Meet with their potential individual clinical supervisor for a preliminary clinical supervision session. Following this session, both the clinical supervisor and supervisee decide whether to continue in a formalised clinical supervisory relationship.
5. When a formalised clinical supervision relationship commences:
6. the clinical supervision working agreement (CWSA) is negotiated and signed
7. the supervisee must negotiate their attendance needs with their line manager. This will assist line managers to maintain adequate rostering for the clinical area.
8. the clinical supervisor notifies the local clinical supervision coordinator of the arrangement.

## Clinical supervisor responsibilities

Clinical supervisors must:

• complete appropriate clinical supervision education and training for nurses/midwives

• maintain their own clinical supervision

• supply a copy of each CSWA to the local clinical supervision coordinator

• notify the clinical supervision coordinator when:

• a new CSWA commences

• a CSWA ceases

• there is a change in their own clinical supervision arrangements

• attend a clinical supervision refresher (or alternative professional development activity) every three years

• complete and submit a re-certification form to the clinical supervision coordinator every three years.

## Line manager responsibilities

Supervisees must consult with their line manager regarding their clinical supervision arrangements. Line managers offer support to clinical supervision by supporting staff:

• access to protected time to provide/receive clinical supervision

• attendance at clinical supervision education and training as appropriate.

## Clinical supervision coordinator

The role of this nominated individual (or group of individuals) is to:

• coordinate access to a clinical supervision awareness session/video for nurse/midwives on commencement of employment

• maintain a register of available clinical supervisors

• maintain a register of nurse/midwifery staff receiving clinical supervision

• act as a champion and key contact person for clinical supervision.

## Cessation of Clinical Supervision Working Agreement

A CSWA ceases when either of the following occurs:

• either party notifies of their intention to withdraw from the clinical supervisory relationship

• contact between clinical supervisor and supervisee has ceased and attempts to contact each other have failed.