

Original Review Article

The concept of Clinical Supervision at workplace

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Abstract

Clinical supervision is a professional relationship and is much crucial and demanding at clinical workplaces. Effective clinical supervision provides direction to ethical practice in clinical setting which benefits the organization and clinician. This article outlines evidence-based real-world advices related to reflective practice, effective feedback and evaluation of supervision which are collected from various literatures that will empower health professionals to efficiently and effectively perform clinical supervision at workplaces.

Key words

Clinical supervision, Mentoring, Medical Education, workplace.

Introduction

Clinical supervision is the professional relationship among supervisor and supervisee aimed at the development of the professional attitude and improvement of clinical competence

[1]. Clinical supervision was first adopted by psychoanalysts and soon this idea was followed by other professions. It was popular among nursing professionals initially but now it's being practiced worldwide [2].

The role of a supervisor is crucial and demanding, as they provide direction to the supervisee, standardise their knowledge, improve skills and maintain the ethics in the clinical practice setting. As stated by Corey, et al. that every health professional at some stage of their profession has to play a role of either supervisee or supervisor which not only benefits organisation and practitioner but also improves patient care [3]. Good supervision provides a conducive environment, where trainees can practice with new approaches which give them an opportunity to reflect on their practice and improve their competency [4]. Some rising issues like better patient outcome and development of critical thinking among students realised the need for supervision in a health profession, as patients are becoming more aware of their health and their expectations are growing. There are more chances of them putting complaints which contribute in making clinical practice more patient-centered. Besides this, evolving evidence-based practice and enhanced technology has raised awareness among health professionals to keep themselves updated and on the track [5].

There are two main purposes of clinical supervision: ensuring integrity of clinical services and developing the expertise of supervisee in service provision. Competence-based clinical supervision is compelling to help trainees translate the acquired knowledge and abilities into real world applications and assess trainees using performance result [6]. Various studies have confirmed the impact of educational counseling on academic achievement. In addition, the satisfaction of students with educational counseling is identified as one of the variables of academic achievement [7]. To execute effective supervision a supervisor must have formalised training, knowledge of contracts, ethical and legal issues, policies and procedures of supervision [8]. This review provide evidence based tips for providing effective clinical supervision at clinical workshop.

Supervisor-Supervisee Relationship

Some fundamental components of the supervisor-supervisee relationship need to be put forward, such as safe working environment, encouraging self-disclosure, trust, identifying transference, countertransference, understanding diversity issues and building appropriate boundaries [3]. As said by Bracton (2008, p. 17) "*It is good to address a problem before it damages the situation*". Identifying trainees who need special training and support can be useful to develop a positive approach of trainee towards training programmes [9]. The supervisor can also look for the indications to identify the trainee in need. Actions and performance of the trainee (like remaining frequently absent, receiving complaints, underperformance) can be observed for this purpose. Supervision can also be defined as a contract between supervisor and supervisee, where the supervisee can report to the supervisor with their work on patient, discuss the case and then reflect on their own work. This contract forms a boundary between them to work effectively by deciding the venue, frequency, duration and professional accountability of supervision session [10]. The clinical supervision takes a lot of factors to be effective and consistent. Supervisor's characteristics, attitude, and knowledge contribute most to these factors. Proper management of all such factors would result in a good supervision [3].

Reflective Practice

A good supervision will benefit the trainee in many ways by increasing self-awareness, confidence, and knowledge. They should also feel more supported which should reduce their emotional stress. They may be better able to learn to develop new solutions for a clinical problem and it also increases their participation in reflective practice [11]. As suggested by Winstanley and White (2003) reflecting on your own practice is a vital component of professional supervision [12].

Effective Feedback

As explained by Dunning and Kruger (2011) [13] some individuals have problems in recognising their lack of knowledge and expertise and such

individuals can't also realise their mistakes. It's a duty of the supervisor to correct them and promote professional practice. Supervisors find it a situation of dilemma where they have to convey a critical message to the trainee without breaking trust in the relationship [14]. To help supervisors with this situation, a technique like "sandwich" approach can be adopted. This is a technique to appraise somebody's work, then addressing the mistake which is again followed by a compliment [14]. To help trainees in difficulty, supervisor must know how to provide negative feedback in a positive way. This is very well explained by Launer (2016) [15]. The author highlighted some rules to be followed in providing feedback. One of them is "*Pendleton's rules*", which says feedback must follow some steps. Both the trainee and the supervisor must discuss what went well and what would have they done to make it better. Launer (2016) [15] also highlighted the idea of "*Hidden curriculum*", which consist of giving more importance to trainees and their ideas by making them part of decision-taking and discussions. This proves helpful in motivating trainees to reflect on their own practice. It is the responsibility of a supervisor to follow such practice and develop a positive attitude for feedback among supervisees'.

Confidentiality

This can be one issue which needs to be properly handled in clinical supervision. Supervisee might not feel safe to share their personal problems with the supervisor [16]. Supervisors attitude and behaviour can make supervisee to avoid sharing their problems with them. These include, failure to teach and track supervisee progress, being sexist, always pointing negative side like deficiencies and weakness. These all have been labelled barrier to a good supervisor and supervisee relationship [17].

Training

A clinical supervision need a critical thinking approach to keep yourself updated which would maximise the usage of clinical supervision process. As suggested by Hunter & Blair (1999)

[10], finishing continue educational program on professional clinical supervision would be best effective way in building supervision skills in clinical practice. On other hand absence of training program leads to confusion in clinical supervision [18].

Evaluation

Evaluation of a supervision session is considered as a vital component of clinical supervision. As described by Jones (2006) [19] and Winstanley and White (2003) [12] suggested, use of focus group discussion, self-reported questionnaires can be utilized as formal evaluation tools to measure different features of clinical session whereas informal method includes regular feedback and interview.

Conclusion

In this review, we tried to cover some components of supervision and discussed how we can incorporate it at clinical workplace. To make a supervision session effective it is essential to have a deep understanding of these facts. Maintaining a good supervisory relationship will be useful to analyze the problems. A supervisor should know the requirements of a good supervisory relationship. This will help understand supervisees need and ultimately ensure patient safety. As developing needs of health profession gave rise to the idea of clinical supervision, it should be good enough to meet the expectations of the supervisee, management and patients.

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