

Merton CCG and Wandsworth CCG Safeguarding Supervision Policy

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1. Introduction

- 1.1 Merton CCG and Wandsworth CCG, as commissioners of health services, have a duty to safeguard and promote the welfare of children and young people. This duty includes ensuring that arrangements are in place for staff to have access to:

‘Appropriate supervision and support for staff, including undertaking safeguarding training’ (P56 Working Together to Safeguard Children 2018)

<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

‘It is the duty of healthcare organisations to ensure that all health staff have access to appropriate safeguarding/child protection training, learning opportunities, safeguarding/child protection supervision and support to facilitate their understanding of the clinical aspects of child wellbeing and information sharing’.

(Safeguarding Children and Young People: Roles and Competencies for Health care Staff 2019)

<https://www.rcn.org.uk/professional-development/publications/007-366>

- 1.2 This policy seeks to identify the staff requiring safeguarding supervision, arrangements in place to access safeguarding supervision and the processes to record and monitor compliance.
- 1.3 This policy includes the safeguarding supervision arrangements in place for the CCG Designated Safeguarding Adults Lead.
- 1.4 This policy is to be read in conjunction with the CCG Safeguarding Children Policy 2019, which references the responsibility of staff to access safeguarding supervision and responsibility of the CCGs to support and ensure arrangements are in place for accessing safeguarding supervision.

2. Safeguarding Vision

- 2.1 Our Vision:

‘Our vision is for the children and young people of Merton and Wandsworth to have access to safe, effective, responsive health services, enabling them to achieve the best possible start in life, positive health outcomes and to have their views and experiences heard’

- 2.2 Safeguarding supervision is an essential element to ensure that the welfare of the child remains the focus of practice and the ‘voice’ of the child is heard. The function of safeguarding supervision is to promote reflective practice and to review the impact of decisions made by professionals on the child.

3. Scope of this policy

- 3.1 This policy applies for all staff with a role which includes the assessment and management of the care of children and those staff who are employed in a dedicated safeguarding roles such as the Named or Designated Safeguarding professionals.
- 3.2 This policy sets out the arrangements in place to access safeguarding supervision and how the CCGs will maintain oversight and assurance of compliance internally and externally in regard to commissioned services.

4. Safeguarding Supervision Arrangements in the CCGs

4.1 Supervision is a process which supports and develops the knowledge and skills of an individual or group through critical reflection of practice. Supervision may be viewed as having three strands (Proctor 1986):

- Normative – (accountability) relating to the effectiveness of practice element of supervision and adherence to policy / procedures / guidance.
- Formative – (learning) relating to the development of knowledge, understanding and skills.
- Restorative – (support) the coping mechanisms and strategies required to manage the emotional impact of working with complex cases.

An additional strand is that of 'engagement and mediation' (Morrison 2005), which is of particular relevance in regard to the challenges of effective partnership working required in the management of complex cases where there are safeguarding concerns.

- 4.2 The supervisor will have the training, experience and skills to facilitate the supervision session. The supervisee will have the training to understand to the process of supervision and will prepare for supervision by identifying cases or issues to reflect on. In the event of non-engagement by the supervisee, the supervisor will escalate the matter to the supervisee's manager and seek to resolve the matter.
- 4.3 Supervision may be individual or group sessions. In all cases supervision will be prearranged, protected time with record made of key issues / action discussed. A supervision agreement (appendix 1) may be used to give clarity to the supervision relationship and the boundaries of confidentiality.
- 4.4 The safeguarding supervision session in terms of the issues discussed is to be confidential, however, if the supervisor has concerns as to the safety of the supervisee's practice then confidentiality will be broken and the issues escalated to the practitioner's manager and where appropriate Director of Quality and Governance. In the event of there being concerns relating to the practitioner's practice having harmed or there being a risk of harm to a child a referral to the LADO will be made by the supervisor.
- 4.5 A record of supervision, in terms of the occurrence, will be made and reported to the CCG Safeguarding Committee.
- 4.6 A record of the content of the supervision will be made and agreed between the supervisor and supervisee.

5. Safeguarding Supervision Arrangements in Commission Services

5.1 The arrangements for safeguarding supervision within commissioned services will be reported to the CCG through the Clinical Quality Review Groups and at the CCG Safeguarding Committee. Robust arrangements will include staff in post to supervise staff (Designated and Named professionals), a supervision policy supported by an audit and reporting process to demonstrate compliance.

6. Named and Designated Professionals

- 6.1 The Designated Professionals will make an offer of safeguarding supervision to the Named professionals, however, there may be arrangements in place for supervision of named professionals. In this case the Designated Professional must be assured as to the quality and frequency of the supervision arrangements and report this to the CCG Safeguarding Committee.
- 6.2 The Named and Designated professionals will have access to the London Named Professional groups – Named Doctor / London LAC Nurses Forum / Designated Professionals Network – all of which offer an opportunity to discuss safeguarding issues and receive peer support.
- 6.3 Senior CCG staff with safeguarding roles / portfolios will require supervision to support their role, however this may be accessed internally or externally.

7. CCG Supervision Arrangements by Staff Group – tabular format.

Staff	Supervision Arrangements: who
Designated Doctors	External arrangements in place
Named GPs	Designated Doctor / Peer Supervision
Designated Nurse Safeguarding Children	Peer supervision / London Network Safeguarding Professionals
Designated Nurse Looked After Children	External arrangement – Tavistock London LAC Nurses Forum
Designated Adult Lead	Peer Support – SW London Group
CCG Children CHC	Designated Nurse Safeguarding Children
CCG staff – ad hoc advice and support	CCG Designated / Named Professionals
Commissioned services Named Nurses	Designated Nurse / Trust internal arrangements / London NNCP Group
Commissioned services Named Doctors	Designated Doctor
Commissioned services – all staff	Named Nurses / Safeguarding Leads

References:

HM Government (2018) Working Together to Safeguard Children

<https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

Morrison T (2005) Staff Supervision in Social Care. Brighton. Pavilion Proctor B (1986) Supervision: a Co-operative Exercise in Accountability in Marken M Payne M (Ed) Enabling and Ensuring Supervision in Practice National Youth Bureau and Council for Education and Training in Youth and Community Work, Leicester.

Appendix 1: Safeguarding Supervision Agreement

This supervision agreement outlines the expectations and responsibilities of supervisee and supervisor:

- Both Supervisor and Supervisee are to prepare for the supervision session.
- Safeguarding supervision is to be prioritised and cancellations avoided.
- Safeguarding supervision - minimum of three monthly.
- Sessions are protected time – avoid interruptions.
- A record of the date and content of the supervision session will be made by the supervisor.
- Brief note of any actions, outcomes will be recorded by the supervisor with and a copy to the supervisee.
- Confidentiality will be maintained, unless there is concern as to the unsafe practice of the supervisee unless unsafe practice is identified.
- Annual review of the Agreement.

Name of Supervisee	
Designation	
Organisation	
Signature	
Date	
Name of Supervisor	
Designation	
Organisation	
Signature	
Date	

Appendix 2: Safeguarding Supervision Record

Date	
Name of Supervisee	
Name of Supervisor	
Issues discussed	
Actions / Escalation	
Professional Development / Learning	