Are you getting what you need from supervision?

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This article aims to provide practitioners with information to evaluate whether they are getting what they need from their current supervision and to think about how to adjust the focus of supervision where this is required. In part, this is achieved by considering the different elements, purposes and possibilities that can be fulfilled within the supervisory relationship, as well as outlining some of the requirements for a safe and reflective experience. It is proposed that a practitioner's needs will vary at different points in their career, and a tool is provided to assist in describing these needs to others. The article includes information about learning styles and how these can influence what 'good' supervision for each individual, as well as an assessment tool for those who do not know what their learning style is. The overall aim is to enhance the supervisory experience of practitioners and increase the value of time spent in supervision.

Keywords: *supervision*

Are you getting what you need from supervision? This is an important question. An increasing number of welfare and health-related professions are relying on forms of either management or clinical supervision to provide oversight of work and support to workers. And yet, research is telling us that many workers are not satisfied with the supervision they are being provided (Grant & Kilman, 2015; Gibbs, 2001). There is a need to assist workers in understanding better the benefits supervision can potentially offer, as well as to articulate better what their needs are to their supervisors.

While an increasing number of organisations are recognising there is a benefit to providing supervision (both to the organisation and the worker), very few ask questions about the quality of the supervision, instead of assuming its simple provision

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is enough (e.g. Davys and Beddoe, 2010). Supervision is held up variously as a protective mechanism for clients and agencies, a quality work check, and a prevention strategy for vicarious trauma (Hingley-Jones, 2016). Yet, there is little evidence of what needs actually to occur in supervision to achieve these outcomes.

Many of those providing supervision have also not been trained in its provision (Kettle 2015), or where they have, there is a reliance on simple attendance at a short course, rather than any rigorous or benchmarked assessment against a supervision skill set. Many management or team leader posts list the provision of supervision as one of the critical tasks of the role, and yet this is rarely a skill set that has been required at recruitment or tested for afterwards. The assumption seems to be that if you have received supervision in the past, you will somehow know how to provide it.

Similarly, the assumption often is made that workers themselves know how to utilise or make the most of supervision. It has been the author's experience that where workers have experienced proper quality supervision in the past, they tend to know what it can offer, are more aware of what they need, and are likely to both seek it out, and even demand it. However, other workers who have experienced supervision that has been unproductive, unsafe or even a waste of time, will either not seek it out, or will actively avoid it.

This article intends to outline the various options and functions that supervision can cover, to assist both supervisee and supervisor better discuss and negotiate what is needed, and what is on offer. Each party comes to the interaction with different skills, styles and requirements (personally and in their role).

The more able the two parties are to have an open discussion about the elements and possibilities in supervision, the better the chance of negotiating a useful, positive and productive supervisory experience, rather than what can become a 'time in the diary' to be endured.

The different elements of supervision

There is a wide range of areas of potential focus in supervision as well as different needs at differing career stages. The relative emphasis and attention should consider the needs of the individual involved, as well as their work context. For example, a more newly qualified worker or someone who has changed fields to a new content area is likely to need a more substantial educative element to supervision for a time. In contrast, a worker in a clinical role long term is more likely to be looking to be challenged about their clinical practice, to better understand their bias and to continue to deepen their learning and reflection.

The nature of the relationship between supervisee and supervisor will also effect the emphasis. Line management or in house supervision is more likely to have a stronger focus on management requirements and the completion of tasks, while external supervision, particularly if paid for by the worker, is more likely to have a focus on the worker's self-determined professional needs and even longer-term career aspirations.

It is also a myth held by many that a "good supervisor" will be able to meet all of someone's professional needs. On the one hand, part of the success of supervision depends on the initiative, preparation, thoughtfulness, honesty and self-insight of the supervisee. However, on the other hand, it is also the case that different elements of supervision can be. It most likely will need to be, provided by various professionals in the worker's sphere. It is unlikely that at all times, a worker will find one supervisor who meets all of their needs. When this does occur, it should be considered a rare and precious find.

Kadushin (1992) argues that there are three main functions of supervision: educational, supportive and administrative. O'Donoghue et al. (2018) analysed 130 articles on social work supervision published from 1958 to 2015, finding supervision consists of organisational, educative, and support functions, and the ways these functions are enacted depends on the context. Over time others have added areas such as personal reflection and impact, clinical issues, work content exploration, systemic issues, career development, and the challenges that come from working with others. There is no one agreed on definitive list of what constitutes supervision, and some supervisors will include areas in their provision that others will not (see Wilkins & Antonopoulou, 2019).
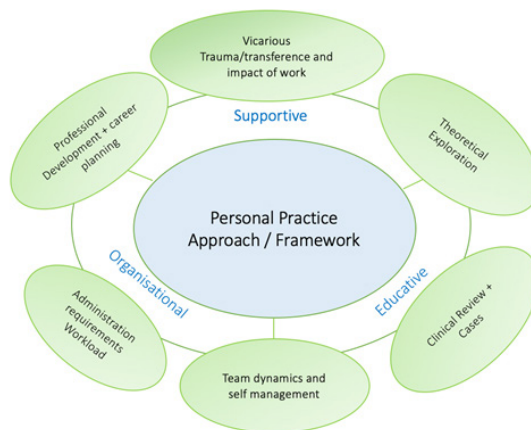
Elements of Supervision

Diagram 1. Elements of Supervision

Articulating your Professional Practice Framework

The author has chosen to centre this article around a part of supervision that is often neglected as an area of explicit focus. That is assisting the worker in articulating their preferred practice framework and approaches. The reason for this is that it underpins and influences all other choices. Not all workers can articulate a coherent model for why they do the work they do and how they go about it. This Approach or Framework includes exploring the messages of their discipline and training, their world views and meta-theories, as well as the causational and treatment models they are drawn to. The author proposes that this is an essential area of exploration in supervision, not every session, but at regular intervals. Assisting a worker articulate their approach to their work, helping them ground their approach in theory and models, can not only make a worker more confident, but it can also open up areas of vulnerability and more significant, more in-depth reflection. This can include reflections on issues important to vicarious trauma such as the maintenance of hope and meaning in work, whether the worker's career trajectory and current role fit with their professional world view and intentions, as well as how their models affect the way they approach their tasks and cases. We all act from theory and belief, whether we can articulate it or not, and coming back to this as a regular review part of supervision can create deep and fruitful supervisory relationships. It is not always safe to start with these discussions, and however, once there is enough trust and safety established, they can be transformative. Paul Gibney's (2014) article can be a sound basis for these kinds of discussions.

Educative

At the early stages of career, or when we change roles/areas of work, supervision can, for a time, take an educative tone. Sometimes we will also seek out a supervisor with a particular skill set or area of practice from whom we wish to learn. Much supervision will have educative elements to it, but sometimes this is a clear and contracted purpose. One option can include both parties researching, reading about, and discussing issues, reading articles or pursuing a specific area of learning. This could be around clinical topics and issues, policies and procedures,

theoretical approaches, or even new and emerging areas of practice.

This can sometimes be the safest area of supervision to focus on early in a supervisory relationship when both parties are still getting to know each other and are reluctant to explore areas that are deeper or more vulnerable.

Dynamics to watch for are where this role is enacted to avoid examination of work - that is, where the supervisee continues to take the one-down position to the supervisor, asking for teaching and 'input' at the expense of worker reflection, vulnerability or exploration of their work in supervision.

Administrative / Task-based supervision

This is a particular and often necessary focus in line management provided supervision and unfortunately, in busy modern workplaces, research is indicating that this form of supervision is focussed on, sometimes to the exclusion of other elements. Weld highlights how managers can struggle to create supervision as a learning environment, and supervision becomes too closely linked with compliance measures and performance (2012:24). This can result in both worker dissatisfaction, but also a genuine risk of complaint but non-reflective workplaces – not at all ideal in a field as complex as welfare. The author would argue a crucial element of supervision, if we are going to claim it is about keeping clients safe and the work accountable, is not just to monitor adherence to tasks and timeframes, policy and legislation, but to also ensure thoughtfully, considered, and accountable practice, which can only be achieved by leaving space for the other elements of supervision.

In many workplaces, there will, of course, need to be space for checking on leave requirements, planning of future work tasks, overview discussion of the case or task progress, monitoring adherence to policy and timeframes, as well as passing information from management to staff and vice versa. However, this should never be the whole sum of supervision. Where too much time is taken up with an administrative focus, consideration needs to be given to separating the functions. Some services now have clearly differing processes with, for example, a monthly administrative 'catch up's' and a separate, more reflective supervision meeting.

Clinical / Content Supervision

For those working with clients or patients, clinical supervision, including that which examines the decision making, case progression, client issues and worker actions, is a crucial area of focus. Clinical supervision can take many forms, and depending on the level of safety in the supervisory relationship. The skill of the supervisor, it can remain surface level, or go quite deep. The author has received supervision at both extremes and a range of places in between. Some clinical supervision is actually administrative supervision in disguise. In essence, it is about discussing the cases and clients, but really just to see if the worker is moving things along, keeping to policy, workload matters or getting close to closing. The author has also worked in a role in a very psychodynamically orientated organisation where supervision was provided three times a week, and there was an expectation of very deep and detailed exploration of clinical decision making and what was influencing this, at all levels. However, clinical supervision at this end of the spectrum appears

to be relatively rare – many workers would like it, and state it is what they want, but creating an environment safe enough to get to that level of vulnerability in one's practice, especially if it is with the person who also does your performance appraisal, is very rare. Peach and Horner (2007) and Beddoe (2010) identify tensions between what they refer to as surveillance on the one hand and support or reflection on the other.

There are some specific clinical supervision models that a number of supervisors are trained in, and different sectors will value this clinical focus more highly than others. Supervisors can also link clinical supervision to a process of clearly articulating one's personal theoretical stance and examining its impact on clinical work.

At the very least, it is suggested that supervision where it is safe to admit and explore areas of doubt and 'imposter syndrome', as well as bias and issues of alignment and over-identification, is crucial for those working with vulnerable clients. If we are truly going to say that supervision is in part about ensuring accountability in the work and that clients are receiving the best service, then getting to discuss these issues, reflecting on challenging experiences and seeking to grown and learn from them, is vital.

For those working in non-clinical roles, supervision of day to day work content is very useful. The author has experience supervising a range of team leaders, managers well removed from clinical practice, and also those working in a range of prevention, project and policy roles. In part, the importance of supervision for these workers seems to be that all of us need to feel that our work matters, that someone cares enough to listen to what it is we are putting time, energy and effort into. However, there can be unique challenges to those in non-clinical roles, including the hope that the work is influencing the wider system and wanting to achieve systemic change. Workers can move into management posts wanting to take on the systems, make changes and achieve very noble goals, only to find themselves frustrated by bureaucracy and caught between personal and organisational values, as well as organisational, economic realities. In project and policy roles, workers may also be passive recipients of responsibility. For example, policy officers can feel helpless after a critical incident or failure, unable to change the policies fast enough to prevent more harm, or unable to garner the political will to support what they see as a necessary change. This can take its toll, as a sense of inertia or inability to bring about broader systems change can be its own kind of burden. Supervision that helps people focus on the bigger picture of the goals and intentions of their management project or work, rather than just the task-based detail, can assist people in maintaining not only their focus and drive but also their sanity and sense of making a worthwhile contribution.

Personal / Professional cross over

This is an area that, depending on theoretical orientation, not all supervisors will wish to explore. In the author's definition of this aspect of supervision, it is not personal counselling, and clear boundaries should be drawn via referrals when individual counselling is needed (which at various points in life, it is). However, it is the author's strong belief, informed by trauma, attachment and psychodynamic orientation, that who we are, and what we bring to the work personally has a significant impact on professional practice. Whether we call it transference/ countertransference, the impact of an empathic engagement or

vicarious trauma, the work changes us. Our inner experience and our views of the world (Pearlman & Saavatine, 1996, Cairns, 2002) are replaced by the work we do, the stories we hear, the things we are exposed to. If workers are going to stay healthily engaged in their work, and integrated within themselves, this impact needs exploring and reviewing.

Not only does the work change us, but we change the work. A worker currently going through a significant life event, like a transition to parenthood, a divorce, a bereavement, isn't neutral in their interventions and decisions (if we ever are). Rather these personal experiences influence what we are interested in, determine some of our approaches and can even change our focus. If we are real about worker accountability in decision making, then the author would argue that the impact of personal life events should always be on the table for exploration as a supervision topic.

Similarly, the impacts of race, ability and gender on our practice are also rich areas for exploration. This is not simply for those from minority groups. In essence, those from the dominant culture also need to be consistently challenged to examine how their bias, their assumptions, their race and identity can impact their work and practice. This includes considering normative assumptions through a lens of white fragility and privilege when working with vulnerable to disadvantaged populations. Supervision should not be so comfortable as to not challenge us around the impact of these assumptions and biases.

In the welfare sector, we also talk abstractly of boundaries, as if everyone has agreed to a set of norms or 'stop points' and yet any group exploration of these boundaries will reveal significant points of difference. Issues of gender, culture and race come into these discussions, as well as the need to explore the use and role of self-disclosure and humour for those in clinical settings, as both reactionary and defensive mechanisms.

It is naïve to think that some of the work is not going to intersect with lived experience, either past experience of the issues coming up clinically, or current experience. We are also living interacting human beings – the cross over will be an issue at times for both supervisee and supervisor.

If the personal/professional interaction is "off the table" as it sometimes is, particularly in line management supervision, a whole area of influence on the work is ignored and unexamined. And yet creating safe enough environments in which to be able to discuss these impacts, and in particular to address areas where we feel vulnerable, is not easy or common (see for example Kettle, 2015). As Weld points out (212:34), to "go into a room with someone who may hold greater experience, or perceived status than yourself, and freely talk about possible mistakes you have made in your work is no easy feat."

Operational / Systems issues

Part of surviving and thriving in a workplace can be the chance to explore and discuss workplace dynamics and challenges in human interactions in a safe and somewhat detached way. Colleagues do not always get along, nor do they always share all the same values or views on how the work can be done. Personality clashes and differences in conflict style can cause all manner of misunderstandings, as anyone who has worked in teams will know. Supervision should provide a place not to complain about dynamics, but explore them in constructive ways, considering causes, our role in them and how to shift dynamics to more constructive and helpful places. It is also

worth considering whether parallel process dynamics can be at play in which the dynamics of clinical work can be replicated in the workplace (see Webb, 2011 and Cousins, 2018). This can include looking at how to enact and encourage the expressing of organisational and professional values where this may not be occurring.

In a literature review undertaken by Ashley-Binge and Cousins (2019) relating to vicarious trauma, one of the findings was that it was often not the "sad stories" that took the most toll - workers in the sector know that is what they are signing up for. Instead, a more significant impact can be where the organisational values are not actually in place, or where the worker is experiencing micro-management and bullying, yet being told the solution is "self-care". Supervision can provide an opportunity to identify and discuss structural disassociation – the part of the worker that needs to compartmentalise and keep going, at least for a time, where the value fit is not there and the impact on practice and the worker, and where there is a need to invoke this defensive mechanism.

Career Planning / Professional development

Another element to be considered in supervision is the area of professional development. This is not merely about identifying the next short the course the worker might like to attend. Instead, it is about whether or not the worker feels they are growing professionally. This could include exploring areas of practice for growth through various methods, such as mentoring, reading, further study or even career emphasis change. Finding spaces to think out loud about possibilities and consider options for ongoing learning and challenge can also be a useful supervision focus.

The percentage of time spent in each of these elements will vary in each supervisory relationship and will depend upon both supervisee need and supervisor approach. It is worth paying focussed attention to deliberating discussion and reviewing the focus, either individually or in supervision at various points in the provision, to ensure the mix is as it should be. Appendix 1 is provided to assist with these discussions.

Purposes of Supervision

What does supervision provide? What are the goals and from whose perspectives? Being clear on its purpose for different stakeholders will assist us in assessing its effectiveness. Some of the various purposes including:

Organisationally

The goals and purposes of supervision from an organisational perspective are often about checking on workload, policy and procedural adherence (when in-house) as well as reducing organisational risk by exploring clinical decisions, and also addressing worker vicarious trauma. There is often a wish to provide a process that will assist with staff retention and support the worker. However, the purpose of organisational provided supervision will often be heavily dependent on the organisational context (Kettle, 2015).

Clients

Supervision can be seen as a way to check worker skills, biases and methods, hence supposedly offering a form of

quality control on behalf of the client.

Professionally

There are various ways in which supervision may be intended to support the worker's particular profession and their professional growth, ensuring (potentially) some professional consistency and competence. As Kettle outlines (2015), although the evidence base on supervision is limited, the available evidence points to proper supervision being associated with job satisfaction, organisational commitment from staff, and growth.

Individual

As outlined, there can be benefits clinically, personally and professionally, mainly when supervision can be provided in safe, reflective spaces. It can challenge and grow the worker, providing an opportunity for transformation, discovery and professional growth. It can also provide a forum for discussing organisational survival, how the service goals and values fit for the worker, as well as discussions on how to work with colleagues. Safe supervision can be an excellent place to explore career hopes and goals, worries with imposter syndrome, and to be accountable for monitoring vicarious trauma responses. As already outlined, it is the author's proposition also that a valuable part of supervision can be the visiting and revisiting at intervals. This personal practice framework underpins their work and approach, refining and updating it as it changes over the career of the worker.

As a result of both these different purposes, there can be many competing agendas overlaid in this one interaction, and the quality of the supervision and the safety can both significantly affect whether these purposes and goals are realised.

Learning Styles

If a worker is to get the most out of supervision, there can be a great benefit in understanding, and being able to articulate the implications of their own learning style. It is also useful for the supervisor to understand both the supervisee's learning style and their own. This can open up the discussion about the kinds of questions, activities and format of supervision that will most challenge and benefit the supervisee. Appendix 2 includes the VARK learning style questionnaire, to assist with this and discusses some implications of the different styles for supervision.

The initial session/s

Ideally, an initial session would focus on expectations, and on establishing the elements and approaches to supervision, including discussion of past supervision experiences. It is also an opportunity for both supervisee and supervisor to get to know each other and begin the supervisory working relationship. Options could include setting a structured agenda for sessions, agreeing on a session-by-session guided approach, and discussion of the logistics of sessions.

Initial sessions are also very much about establishing a rhythm and a norm. No two supervisory relationships are alike. Each party influences it in unique ways, and relationship alchemy is created that is unique to this interaction.

A note on safety and trust

While it is not the intention of this article to address the dynamics, games and power differentials that can be enacted and interfere with safe and open supervision, it is essential to acknowledge that the degree to which a supervisee can benefit from supervision will depend on their own past experiences, whether these impact trust and openness, as well as the ability of the supervisor to establish and then continuously demonstrate, a safe supervision environment. O'Donoghue et al. (2018) say a supervision relationship that is characterised by trust, support, honesty, openness, has the ability to collaboratively navigate power relations as well as respect for social and cultural differences.

Where a supervisee feels unsafe or is worried about the potential for criticism, payback or a lack of confidentiality, supervision will remain surface level. There may well be attendance and a level of compliance, but many of the goals of supervision will remain unrealised. While attending supervision may be a form of worker self-care, this will depend on the level of safety of what is on offer.

Conclusion

The author hopes that in exploring supervision in this way and providing the tools below, there is a greater chance of workers articulating their needs, their struggles and exploring options for better supervisory provision. This will, in turn, will assist them in becoming a more integrated worker who is supported to be reflective and considered in their practice.

A supervisor should aim to ensure all elements of supervision are included over time, noting how each supervisory relationship develops its own style, co-created by the participants. It is the role of the supervisor to create review points to ask about whether supervisees needs are being met, although this can also be initiated by the supervisee if not forthcoming from the supervisor.

In terms of skill set, there is a need for more research about what makes for a good supervisor and competent supervision, and some of the Emotional Intelligence literature is adding to considerations in this area. However, more welfare specific research is needed.

Klauber, from whom the author received supervision for a time, outlines an excellent litmus test for an excellent supervisory space (*Forward* in Bradley and Rustin, 2008):

"Bion's concept of containment … is one way of describing the establishment of a setting that is accepting but not passive, thought-provoking without being directly challenging, inclusive without being seeming to make everyone say or think the same thing. If this is achieved, then something transformative can happen."

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APPENDIX 1 - PLANNING ELEMENTS OF SUPERVISION TEMPLATE

Element	Degree of focus	Areas / Reasons
Educative	%	Areas for learning and growth:
Admin	%	Agency required; leave; work load planning and tasks
Clinical / Content	%	Cases
Personal Professional	%	Vicarious Trauma
Workplace / Team Interactions	%	Challenges / Dynamics to manage

Learning Style/s of Supervisee:	Implications for supervision:
Learning Style/s of Supervisor:	Implications for supervision:

Questions for early in the supervisory relationship

- What have been my past experiences of supervision? What works for me, what hasn't and why?

Review questions for a comfortable supervision relationship

- Is this too comfortable? Do I regularly feel challenged to see things differently?
- Am I still growing professionally? Is there a risk of confirmation bias, where I have sought out someone who will simply confirm my own world view?

Review questions where there are challenges / the supervision is not meeting your needs

- Is it safe to raise my needs with this supervisor and try to renegotiate the relationship?
- Is it realistic that all my supervisory needs are met in one relationship or do I need to look at setting up alternative and complimentary relationships, such as through peer supervision or external supervision?

LINK for the VARK Questionnaire

https://vark-learn.com/the-vark-questionnaire/