


Adapting Clinical Supervision to Critical Care – one Trust's Experience.

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Session Aims

- To define clinical supervision, its history and development.
- To describe local initiatives within Gwent Healthcare NHS Trust.
- To identify challenges to practice and adaptations for critical care.
- To discuss evaluation, perceived benefits and future developments.



What?

Clinical supervision is a regular and formalised reflective conversation between at least two qualified health professionals, with the intention of both supporting and developing clinical practice.

(Driscoll, 2007)



Milestones

- ❑ 1982 RMN syllabus includes clinical supervision
- ❑ 1991 Allitt Inquiry
- ❑ 1995 UKCC Position Statement
- ❑ 1998 A First Class service: quality in the new NHS (DOH)
- ❑ 2008 NMC Principles



NMC Principles - 2008

- ❑ Clinical supervision supports practice, enabling registered nurses to maintain and improve standards of care.
- ❑ Every nurse should have access to clinical supervision.
- ❑ Recommend inclusion in pre and post registration education.
- ❑ Systems best developed at local level.



Gwent Healthcare Trust Initiatives

- 2003 Appointment of Clinical Supervision Lead
- In house training groups (Open College Network) / Clinical Supervision Forum
- 2005 First supervisors' training group in Critical Care
- 2006 Clinical Supervision Lead retires – no replacement – Forum disbands



So What?

- ❑ Training continues in Critical Care: 3 groups – 11 Supervisors
- ❑ 1:1 sessions for staff / group sessions for supervisors
- ❑ Clinical incident debriefing
- ❑ SCBU / Trust training day



Challenges

- Time
- Staff shortages
- Local “pocket”
- Management perceptions
- Organisational culture



Adapting to Critical Care

- ❑ Start small – accept initial limitations
- ❑ Gain support of Senior Nurse
- ❑ Encourage interested staff
- ❑ Flexibility of sessions
- ❑ Opportunity for ad hoc supervision



Now What?

- ❑ Evaluation – does clinical supervision improve patient care?
- ❑ Manchester Clinical Supervision Scale (Winstanley 2000)
- ❑ Welsh Standards for the practice of Clinical Supervision (Rafferty et al 2007)



Benefits

- Supported reflection and learning from stressful situations
- “Thinking” practitioners – reflection “in action”
- Empowerment to challenge practice / behaviour
- Transferable skills



Future

- Introduce more group supervision
- Study days for managers / ward sisters
- New Trust supervisor training
- Alternative approaches e.g. telephone / internet



Any Questions

