

OP05

Adult Safeguarding Supervision Policy

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1.0 Policy Statement (Purpose / Objectives of the policy)

The Royal Wolverhampton NHS Trust, ('The Trust') provides a range of community and acute health services to adult patients. The Trust has a statutory accountability to safeguard adults who are at risk of or experiencing abuse, in both the acute hospital setting and the community.

The purpose of the Adult Safeguarding Supervision Policy is to promote and develop a culture that values and engages in regular safeguarding supervision. All aspects of this document regarding potential Conflicts of Interest should refer first to the [Conflicts of Interest Policy \(OP109\)](#). In adhering to this Policy, all applicable aspects of the Conflicts of Interest Policy must be considered and addressed. In the case of any inconsistency, the Conflicts of Interest Policy is to be considered the primary and overriding Policy.

Policy to be read in conjunction with [Safeguarding Adults at Risk \(OP 53\)](#).

2.0 Definitions

Adult – Any person aged 18 or over.

Safeguarding Adults – safeguarding duties apply to an adult who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- Is experiencing, or is at risk of, abuse or neglect; and;
- As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of, abuse or neglect.

Safeguarding supervision:

Supervision is a term that is used to describe a formal and agreed process of professional support and learning which enables staff to develop their capacity to use their experiences to review practice, receive feedback on their performance, build emotional resilience and think reflectively about the effectiveness of the professional relationships they have formed with patients and their families.

The Care Act 2014 Support and Guidance advises that regular face-to-face supervision and reflective practice is key when supporting staff to work confidently and competently when identifying and dealing with safeguarding situations.

Adult Safeguarding: Roles and Competencies for Health Care Staff (2018) states that:

“Healthcare organisations must ensure that those who use their services are safeguarded and that staff are suitably skilled and supported” (pg. 5).

Safeguarding supervision is a mechanism to facilitate this support.

As well as instructing that all staff:

“Understand how to access local safeguarding supervision, networks and support.”
(pg. 17).

A **supervisee** is the person who is supervised.

A **supervisor** is a Named Nurse, Safeguarding Adults Nurse, or identified Safeguarding Supervisor who has completed a recognised Level 4 supervisor’s course.

3.0 Accountabilities

3.1 The Chief Nurse –

- As the nominated Director/Executive Lead is responsible for coordinating the management of safeguarding.
- Ensures that the Board receives sufficient assurance on the effectiveness of the service.

3.2 Head of Safeguarding –

- Manages the Children and Adult Safeguarding Service and provides expert leadership on all aspects of the safeguarding agenda.
- Is responsible for ensuring that the Trust has robust systems and processes in place for the protection and on-going support of adults and children.

3.3 Safeguarding Adults Lead –

- Manages the Adult Safeguarding Service and provides leadership on all aspects of the safeguarding agenda.
- Will ensure that the Adult Safeguarding Service has the knowledge and skills to provide adult safeguarding supervision.
- Will ensure that this document is effectively implemented, and its guidance and principles embedded in practice.
- Will monitor safeguarding supervision compliance where applicable.

3.4 Safeguarding Adults Team –

- Will provide expert effective support and supervision to staff within RWT.
- Will act as a resource providing accessible, accurate and relevant information to all RWT staff.
- Will take appropriate actions required following supervision (to include escalation or liaison with senior management).

3.5 RWT Employees –

- All RWT staff who receive adult safeguarding supervision will be aware of the policy and how it impacts on their practice.
- All Employees will know how to contact the Named Nurse/Safeguarding Nurse for guidance and support.

4.0 Policy Detail

The adult supervision process will:

- Ensure that practice is consistent with [Multi-agency policy & procedures for the protection of adults with care & support needs in the West Midlands](#) and the organisation's own procedures.
- Ensure that the voice of the adult is heard and that "making safeguarding personal" is considered.
- Promote evidence based practice.
- Provide a safe environment for reflection and professional challenge.
- Acknowledge the emotional impact of the work practitioners are undertaking.
- Recognise and manage feelings and beliefs which may affect the safeguarding of adults.
- Identify when a case needs to be escalated due to concerns about case progress or other aspects of case management, including ineffective multi agency working.
- Ensure that sufficient time is allocated for the supervision to be carried out effectively.
- Reflect an ethos of equal opportunities, embrace diversity, and promote anti-oppressive practice as directed by the [Equality Act 2010](#).
- Ensure that practitioners fully understand their roles and responsibilities. The process of safeguarding supervision will be underpinned by the principle that each staff member remains accountable for their own professional practice and that the supervisor will be accountable for the advice they give.

4.1 Confidentiality

It is essential that those who receive supervision understand that while the sessions primarily are confidential, they must also be aware that if any concerns arise during the sessions that may put an adult, child, or staff member at risk these concerns will be escalated through the appropriate safeguarding process. Professional practice concerns highlighted during supervision will also be escalated to the staff member's manager.

4.2 Frequency of supervision

Staff Group	Frequency	Method
All RWT Clinical Staff (including Nurses, HCA's, Doctors, and Allied Health Professionals) who have face to face contact with adult patients.	Recommended every 6 months or ad hoc as required.	Face to face (individual and/or group)
Identified areas of higher need:	Recommended every 3 months or ad hoc as	Face to face (individual and/or group)

<ul style="list-style-type: none"> • Emergency Dept. • Sexual health 	required.	
Nominated champions: <ul style="list-style-type: none"> • MCA/DoLS • Domestic Abuse • Adult Safeguarding 	Every 3 months as per champion job description or ad hoc as required.	Face to face (individual and/or group)
Adult Safeguarding Team	Every 3 months, or ad hoc as required.	Individual face to face.

The length of supervision will be an hour.

4.3 Supervision agreement

A Supervision Agreement will address the administrative, professional, and psychological aspects of supervision. It demonstrates continual development, clarifies roles and responsibilities and accountability. This will be completed by the supervisor and supervisee at the beginning on the first session and reviewed at the start of any subsequent session. ([Appendix 1](#))

4.4 Compliance

The Adult Safeguarding Team will maintain a record of supervision attendance database which is listed on the asset register and compliant with GDPR. It is imperative the practitioner completes, as part of their supervision, all paperwork required as outlined in this policy.

4.5 Individual supervision

The supervision process will utilise Kolb’s reflective cycle ([Appendix 2](#)). During the supervision session an individual safeguarding supervision record will be completed together by the supervisor and supervisee ([Appendix 3](#)).

4.6 Group supervision

The supervision process will utilise Kolb’s reflective cycle ([Appendix 2](#)).

During the supervision session a group safeguarding supervision record will be completed together by the supervisor and supervisees ([Appendix 4](#)).

4.7 Ad Hoc Supervision

It is recognised that staff will often require advice or support in relation to safeguarding adults outside the scheduled sessions. This may be particularly beneficial post incident. To access this staff should contact the Adult Safeguarding Team directly and arrange a session.

This can be accessed on an individual or group basis and the corresponding record will be completed.

4.8 Recording of supervision sessions

Record keeping is an integral part of a practitioner's practice. All records regardless of format must be completed in accordance with RWT record keeping policy and relevant professional standards. Copies of supervision documentation and agreements will be saved in a restricted access file on the Safeguarding Adults drive and copies sent electronically to the supervisee.

If adult safeguarding advice is given to the supervisee by the supervisor, then this will be recorded on Adult Safeguarding Advice Log by the supervisor and emailed to the supervisee (as per Adult Safeguarding Advice Log procedure) and a copy filed electronically in the patient's clinical records.

4.9 Safeguarding Team supervision

The Adult Safeguarding Team will also access specialist supervision from appropriate supervisors. Documentation will be completed but will vary according to the location of the supervisor as they are often employed by other Trusts or accountable bodies.

5.0 Financial Risk Assessment

1	Does the implementation of this policy require any additional Capital resources	No
2	Does the implementation of this policy require additional revenue resources	No
3	Does the implementation of this policy require additional manpower	No
4	Does the implementation of this policy release any manpower costs through a change in practice	No
5	Are there additional staff training costs associated with implementing this policy which cannot be delivered through current training programmes or allocated training times for staff.	No
	Other comments	

6.0 Equality Impact Assessment

An initial equality analysis has been carried out and it indicates that there is no likely adverse impact in relation to Personal Protected Characteristics as defined by the Equality Act 2010.

7.0 Maintenance

This policy will be reviewed every three years by the Adult Safeguarding Service or earlier if warranted by a change in standards, guidance, or legislation and or if changes are deemed necessary from internal source.

8.0 Communication and Training

The importance of safeguarding supervision will be reiterated in the Adult Safeguarding training for all Trust staff as referred to in [OP 41 Trust Mandatory Training Policy](#). This safeguarding supervision policy will be disseminated via Trust Safeguarding Group (TSG) and a Trust wide bulletin sent out in the Trust Brief.

9.0 Audit Process

Criterion	Lead	Monitoring method	Frequency	Committee
Monitoring of safeguarding supervision compliance for specified roles.	Named Nurse for Safeguarding Adults	Monitoring of routine safeguarding supervision compliance.	A quarterly report will be produced	Trust Safeguarding Group

10.0 References

- Department of Health and Social Care (2014) Care and support statutory guidance. Available at: <https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>
- RCN (2018) Adult Safeguarding: Roles and Competencies for Health Care Staff. Available at: <https://www.rcn.org.uk/-/media/royal-college-of-nursing/documents/publications/2018/august/pdf-007069.pdf?la=en>
- Equality Act (2010) Available at: <https://www.gov.uk/guidance/equality-act-2010-guidance>

Part A – Document Control

Policy number and Policy version: OP05 Version 1.0	Policy Title: Adult Safeguarding Supervision Policy	Status: Final		Author: Helena Dempsey, Named Nurse Safeguarding Adults Director Sponsor: Chief Nurse
Version / Amendment History	Version	Date	Author	Reason
	1	July 2021	Named Nurse Safeguarding Adults	To provide clear policy and expectation of required processes of supervision in safeguarding.
Intended Recipients: This policy applies to all staff members who are directly employed by RWT who deliver or receive planned or ad hoc safeguarding supervision.				
Consultation Group / Role Titles and Date: Head of Safeguarding, Senior Managers, Service Leads, Clinical Commissioning Group, Trust Safeguarding Group (TSG).				
Name and date of Trust level group where reviewed			Trust Policy Group – November 2021	
Name and date of final approval committee			Trust Management Committee – November 2021	
Date of Policy issue			December 2021	
Review Date and Frequency: (standard review frequency is 3 yearly unless otherwise indicated – see section 3.8.1 of Attachment 1)			November 2024 (every 3 years)	
Training and Dissemination: Policy accessible via Intranet Mandatory Safeguarding Adults training Trust Safeguarding Group RWT Trust wide bulletin				
Publishing Requirements: Can this document be published on the Trust’s public page: Yes If yes you must ensure that you have read and have fully considered it meets the requirements outlined in sections 1.9, 3.7 and 3.9 of OP01, Governance of Trust-wide Strategy/Policy/Procedure/Guidelines and Local Procedure and Guidelines, as well as considering any redactions that will be required prior to publication.				

<p>To be read in conjunction with: OP109 Conflicts of Interest Policy OP53 Safeguarding Adults at Risk CP41 Safeguarding Children Policy OP110 Prevent Policy OP108 Domestic Abuse Policy OP107 Safeguarding Staff Experiencing Domestic Abuse Policy CP06 Consent Policy OP85 Information Sharing Policy Wolverhampton Safeguarding Adults and Children Policies Multi-agency policy & procedures for the protection of adults with care & support needs in the West Midlands Adult Safeguarding Intercollegiate Document: Roles and Competencies for Health Care Staff First edition: August 2018 Care Act (2014) Care and support statutory guidance</p>	
<p>Initial Equality Impact Assessment (all policies): Completed Impact assessment (as required): Completed</p>	
<p>Monitoring arrangements and Committee</p>	<p>A quarterly report on safeguarding adult supervision compliance will be presented to the Trust Safeguarding Group and to CCG as part of the dashboard reporting.</p>
<p>Document summary/key issues covered. The Royal Wolverhampton NHS Trust has a statutory duty to safeguard and promote the welfare of adults who are experiencing or at risk of experiencing abuse and/or neglect. (Care Act 2014). The Care Act 2014 Support and Guidance advises that regular face-to-face supervision and reflective practice is key when supporting staff to work confidently and competently when identifying and dealing with adult safeguarding situations. This document outlines the process and expectations of supervisors and supervisees and provides documentation for the recording of supervision in safeguarding cases.</p>	
<p>Key words for intranet searching purposes</p>	<p>Safeguarding service Safeguarding adults Safeguarding supervision Supervision</p>
<p>High Risk Policy? Definition:</p> <ul style="list-style-type: none"> • Contains information in the public domain that may present additional risk to the public e.g. contains detailed images of means of strangulation. • References to individually identifiable cases. • References to commercially sensitive or confidential systems. <p>If a policy is considered to be high risk it will be the responsibility of the author and director sponsor to ensure it is redacted to the requester.</p>	<p>No</p>

(Part B)

Ratification Assurance Statement

Name of document: Adult Safeguarding Supervision Policy

Name of author: Helena Dempsey Job Title: Names Nurse for Safeguarding Adults

I, Helena Dempsey the above named author confirm that:

- The Policy presented for ratification meet all legislative, best practice and other guidance issued and known to me at the time of development of the said document.
- I am not aware of any omissions to the said document, and I will bring to the attention of the Executive Director any information which may affect the validity of the document presented as soon as this becomes known.
- The document meets the requirements as outlined in the document entitled Governance of Trust- wide Strategy/Policy/Procedure/Guidelines and Local Procedure and Guidelines (OP01).
- The document meets the requirements of the NHSLA Risk Management Standards to achieve as a minimum level 2 compliance, where applicable.
- I have undertaken appropriate and thorough consultation on this document and I have detailed the names of those individuals who responded as part of the consultation within the document. I have also fed back to responders to the consultation on the changes made to the document following consultation.
- I will send the document and signed ratification checklist to the Policy Administrator for publication at my earliest opportunity following ratification.
- I will keep this document under review and ensure that it is reviewed prior to the review date.

Signature of Author: 

Date: 10/09/21

Name of Person Ratifying this document (Director or Nominee):
Job Title: Vanessa Whatley on behalf of Yvonne Higgins

Signature: 

- I, the named Director (or their nominee) am responsible for the overall good governance and management of this document including its timely review and updates and confirming a new author should the current post-holder/author change.

To the person approving this document:

Please ensure this page has been completed correctly, then print, sign and email this page only to:
The Policy Administrator

IMPLEMENTATION PLAN

To be completed when submitted to the appropriate committee for consideration/approval

Policy number and policy version	OP05 – Version 1.0	
Reviewing Group		Date reviewed:
Implementation lead: Helena Dempsey, Named Nurse Safeguarding Adults		
Implementation Issue to be considered (add additional issues where necessary)	Action Summary	Action lead / s (Timescale for completion)
Strategy; Consider (if appropriate) <ol style="list-style-type: none"> 1. Development of a pocket guide of strategy aims for staff 2. Include responsibilities of staff in relation to strategy in pocket guide. 	Share with Trust Safeguarding Group (TSG) Members. To update RWT staff of the availability of the policy via the Trust Brief.	Helena Dempsey December 2021
Training; Consider <ol style="list-style-type: none"> 1. Mandatory training approval process 2. Completion of mandatory training form 	Ensure policy content is discussed in all mandatory safeguarding training.	Helena Dempsey December 2021
Development of Forms, leaflets etc.; Consider <ol style="list-style-type: none"> 1. Any forms developed for use and retention within the clinical record MUST be approved by Health Records Group prior to roll out. 2. Type, quantity required, where they will be kept / accessed/stored when completed 	No form development is required.	
Strategy / Policy / Procedure communication; Consider <ol style="list-style-type: none"> 1. Key communication messages from the policy / procedure, who to and how? 	This policy outlines the process and expectations of supervisors and supervisees and provides documentation for the recording of supervision in safeguarding cases.	

Financial cost implementation Consider Business case development	No financial costs.	
Other specific Policy issues / actions as required e.g. Risks of failure to implement, gaps or barriers to implementation	None.	

Appendix 1

Adult Safeguarding Supervision Agreement

Name of Supervisee	
Name of Supervisor	

Agency Expectations:

The Trust expects practitioners to be supervised regularly at a frequency determined in the main body of the policy dependant on role.

Key areas to be addressed during supervision:

To appraise existing programs of care and supportive packages, to ensure that they are sensitive to the current needs of the adult and consider the importance of Making Safeguarding Personal.

To enable the practitioner to perform to the standards specified by their own professional body (see NMC Code of Conduct), Wolverhampton Safeguarding Together and RWT Trust policies and procedures.

To ensure the practitioner is clear about his/her roles and responsibilities within RWT and the multi-agency arena and confirm accountability for the work undertaken by the practitioner.

The health professional will be able to reflect in depth on issues affecting practice and thus be supported with personal and professional development towards achieving, maintaining and creatively developing and sustaining a high standard of practice.

As a Supervisee I agree to:

Prepare for the sessions by having a clear understanding of the case/theme(s) to be discussed and current concerns.

Take responsibility for making effective use of the time, including punctuality, and any actions taken as a result of supervision. Be willing to learn, to develop skills and be open to receiving support and challenge.

As a Safeguarding Supervisor I agree:

To offer you advice, support and supportive challenge to enable you to reflect in-depth on issues affecting your practice in relation to adult safeguarding.

To be committed to continually developing my competencies as a professional and safeguarding supervisor.

To keep all information revealed in the supervision sessions confidential, with the following exceptions:

- You disclose, or the supervision uncovers, any unsafe or unethical practice you are unwilling to address.
- You repeatedly fail to attend pre-arranged sessions and offer no explanation for non-attendance.
- Disclosure of a safeguarding incident that has not been reported through the appropriate channels.
- In case of concerns regarding professional abuse the Safeguarding Supervisor will follow internal and external protocols as regards management of allegations of professional abuse.

I will endeavour to support you to deal appropriately with the issue identified, alongside discussion with your line manager. An action plan will be developed and escalation will be considered should concerns remain unresolved.

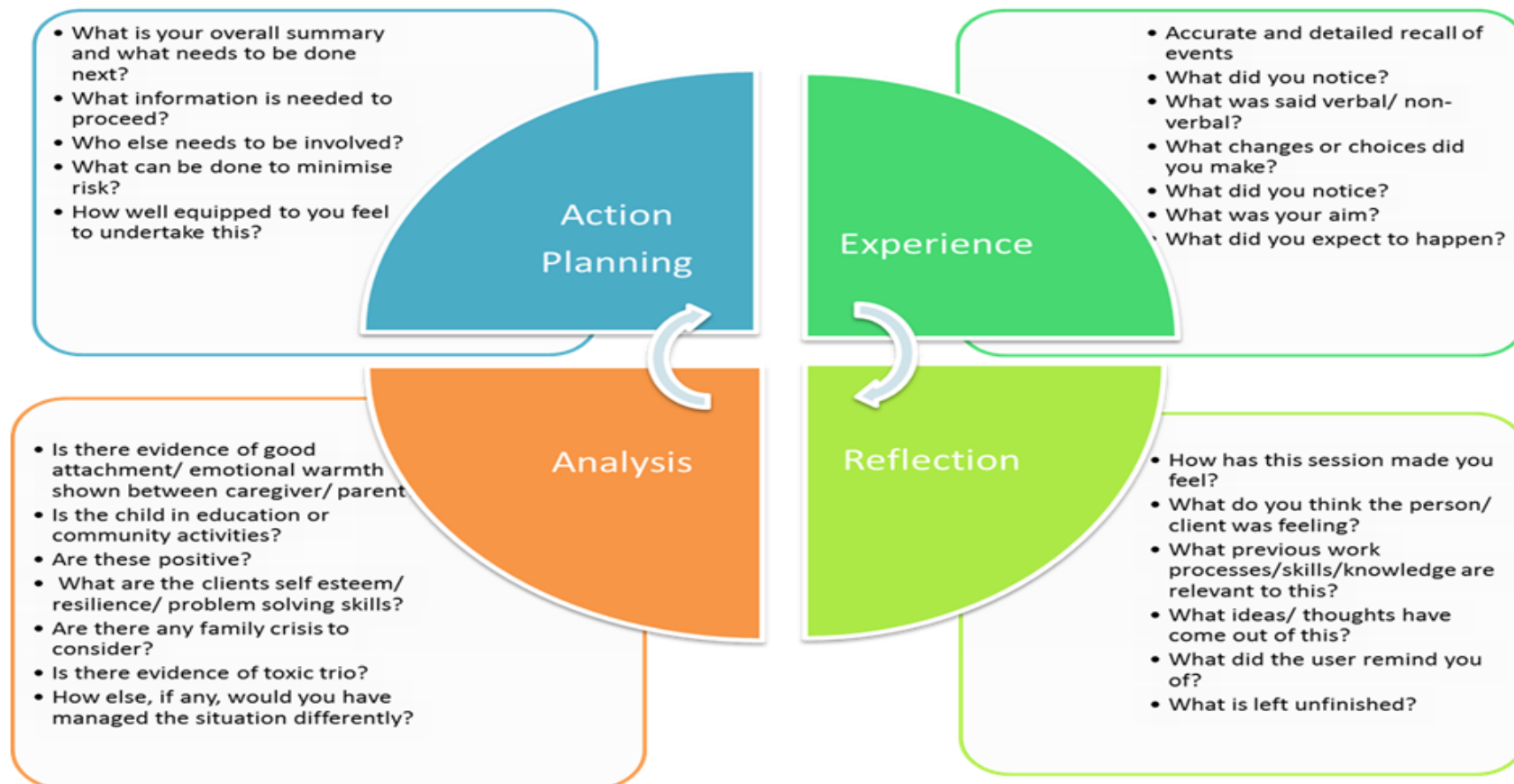
Supervisor	
Signature	
Date	
PIN/Designation (or stamp)	

Supervisee	
Signature	
Date	
PIN/Designation (or stamp)	

This agreement is to be reviewed at each supervision session.

Appendix 2

Kolb's Reflective Cycle



Appendix 3

Adult Safeguarding Supervision Record (Individual)

Name of supervisee	
Job role	
Work base	
Name of supervisor	
Date of session	
Duration	
Topics discussed	
Outcome/Action plan	
Evaluation/Learning	

Topics discussed	
Outcome/Action plan	