

Integrating reflective clinical supervision program into O&P practice

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Introduction

Clinical Supervision (CS) describes the process of an experienced professional (supervisor) supporting a less experienced professional (supervisee) to share knowledge, improving clinical practice and client outcomes (Fitzpatrick, et al., 2012). Reflective practice is an important part of CS and relies on the supervisee regularly reflecting on all facets of their work experiences (Snowdon, et al., 2020). Regular CS results in improved quality of care, clinical governance, increased job satisfaction and reduced stress (Dawson, et al., 2013).

Until recently, the St Vincent's Hospital O&P department offered informal CS, focusing on clinical skill development. A structured formal reflective CS program has now been integrated into practice.

Method

Subjects: 15 O&Ps and 2 technicians participated in the structured CS program.

Apparatus: N/A

Procedure: A training session was conducted based on the Victorian Allied Health Clinical Supervision Framework (Health and Human Services, Victorian Government, 2019) outlining what CS is and its benefits. The responsibilities of the supervisee and supervisor were clarified and the process of setting up a CS agreement was discussed. Supervisees were paired with non-direct reporting supervisors. Clinical supervision sessions were expected to occur monthly for an hour, away from the workplace.

Questionnaires were completed before introducing the CS program and at 6 and 12 months. Responses were reviewed for themes and followed up with department feedback sessions to address knowledge gaps and concerns.

Results

Prior to the CS program beginning, 1 participant reported previously experiencing formal CS with 71% (n=7) unsure of their role as a supervisee. 12 months into the program supervisees had completed mean 5.7 (max 10) sessions. Supervisee perspective questionnaire (n=9) showed 55% reporting CS was an important part of their work routine,

66% stating finding time for CS was achievable. The overall benefit of CS program's mean rating 7/10, with 78% reporting it had improved work well-being and minimized stress, 66% stating it had supported professional development.

Discussion

A majority of the department had not participated in monthly CS sessions reducing the effectiveness and benefit of CS. Reflective CS is new to the department and requires both experience and confidence to become a regular, valued part of the work routine.

Conclusion

St Vincent's Hospital O&P department will continue to refine and review the CS program to support reflective practice, and staff wellbeing thus ensuring high-quality care for our clients.

Acknowledgements

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