

## Workforce Development Pathway 8 – Supervision, Mentoring & Coaching

*A recovery-oriented service allows the opportunity for staff to explore and learn directly from the wisdom and experience of others.*



### What will you get out of this chapter?

- ✓ A clear understanding of the difference between clinical supervision and line supervision
- ✓ A clear understanding of the role and importance of supervision, mentoring and coaching
- ✓ An understanding of reflective practice and its importance in supervision and support practices
- ✓ What is considered good practice in supervision, mentoring and coaching?
- ✓ The pros and cons of external versus internal supervision

Supervision and support practices, as part of workforce development, can be useful to assist with recruiting staff, retaining valuable staff, supporting and encouraging good practice, worker well-being, and engaging in reflective practice. **Supervision allows staff to reflect on the core tenets of recovery and recovery-oriented services.** The workforce, in partnership with consumers and carers, is at the heart of achieving a recovery-oriented service system.

It seems that there is a hybrid kind of supervision that occurs in the community mental health sector. Possibly due to budget and time constraints, it often does not seem appropriate to consider the process of supervision, mentoring and coaching as happening distinctly, they are all closely linked. Managers should be clear on exactly what the organisation offers in terms of supervision and support, its purpose and goals.

Supervision and support needs will be different for different organisations but this can be easily understood by means of a needs analysis. The key is for managers to trial and evaluate different supervision and support programs to find the most appropriate model for the organisation. This could include promoting that there is a process in place for staff to access Employee Assistance Programs (EAP) on an as needs arise basis.

## Definitions and terminology

### What is supervision?

Supervision serves an educative and supportive function. It is an opportunity to raise professional issues and gain further expertise. Supervision allows an individual to learn from their own experiences in working with consumers, review and debrief approaches to recovery-oriented support practices, and ensure that service delivery is following best practice standards. The supervisor must have skills to facilitate regular and systematic supervision. Supervision can be facilitated by an individual, in a group setting or in a triad, with an additional facilitator, to suit the size and culture of the organisation. Group supervision may be a more feasible option for smaller or rural organisations.

### What is clinical supervision?

In some community organisations, because of the staff employed, a clinical model of supervision is in place. Traditionally, the word 'clinical' has been associated with a medical model of treatment and care and one that does not 'fit' with recovery principles in the community mental health or 'non-clinical' setting. This clinical model focused on decompartmentalising or 'breaking down' a person's symptoms, and treating them systematically. However, clinical services are now recognising the importance of looking at individuals holistically, taking into account context and other factors for their mental well-being, e.g. connectedness to other people, occupation and proper housing. As a result of mental health and other services attempting to work more closely and in partnership across all settings, the definitions of 'clinical practice' seems to be blurring. However, community mental health organisations, whether delivered in non-clinical or clinical settings, do share the following aspects of clinical practice - professional/trained staff working in partnership with consumers in a setting (be this a community mental health centre, the person's home, etc.) according to knowledge and evidence-based practice, to provide recovery-oriented interventions and support for people living with a mental health problem.

### What is line supervision?

This category of supervision includes operational supervision, which may be provided by a line manager. A line manager has a clear line of accountability. They are responsible for day-to-day management of workplace practices and service delivery, planning and monitoring workload, ensuring quality of work, ensuring health and safety, time management, motivating, administration and record-keeping.

### What is managerial supervision?

This is a kind of professional supervision which is provided by a professional senior from the same discipline. Professional supervision from a manager/senior is about ensuring good governance is being followed and that the organisation is working in accordance with its goals and vision. Professional supervision could cover some/all of the following areas:

- The context of professional practice (systemic competence and role efficacy);
- The conceptualisation of strategy (conceptual competence and ethical judgement);
- The competent response to expressed client need (technical skills); and,
- Critical self-awareness (personal development).<sup>143</sup>

Management appraisal systems and supervision should run parallel to each other, although agendas for each can be identified and planned in either setting

As the consumer and carer workforce grows it is important to consider different supervision and mentoring practices that are appropriate to different job roles. For example, a Consumer Advocate compared to a Peer Support Worker may require different supervision or support practices as part of their professional and personal development. Again, this is about finding the right 'fit' for the staff and organisation - if this happens, supervision practices can provide a wonderful opportunity for personal and professional development and positive service outcomes. Consumer Workers often receive supervision that is the same for Mental Health Support Workers. Mismanagement of staff in consumer and carer designated roles, where there may have been no supervision or problematic

supervision, has in some cases lead to role confusion and strain, conflict of interest, staff becoming unwell, and other negative consequences. The supervision needs of Consumer and Carer Workers is an area that needs to be explored further as there is no current evidence of what is most effective and appropriate practice.

Table 3 - Typical roles and responsibilities of line management supervisor versus supervisor

Line management supervisor	Supervisor
Human Resource Management (e.g. time/attendance, leave, disputes, performance)	Facilitate skills and knowledge acquisition, engage in reflective practice, ensure service delivery is following best practice & recovery-oriented standards
Budget/resource issues	Educating (teaching, facilitating, conceptualising about professional issues, evidence-based interventions/best practice/recovery-oriented service systems)
Change management	Mentoring (e.g. monitoring, evaluating, promoting enhanced organisational skill)
Work allocation	Supporting (listening, understanding, reflecting)
Approving practice supervision agreements	Ethical issues
Code of Conduct issues	Code of Conduct issues
Client management	Negotiate content of supervision agreement with supervisee

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### What is mentoring?

Mentoring can be defined as either an informal or formal process and can be an important professional development tool for staff, including for managers. Informal mentoring develops on its own between the individual staff member and desired mentor, and formal mentoring involves allocation of a mentor. Both processes can be encouraged and supported by the work place. Mentoring can be provided by someone from within the organisation or an external person. This person may be engaged in the relevant field of practice or involved in a separate field. The mentor provides counsel, insight and guidance and acts as a sounding board for ideas and decisions that relate to the mentee's career. A mentor can provide advice in professional development strategies, planning career goals, establishing contacts in the field of interest, feedback and exchange of ideas. The idea of a mentor is someone with qualities that appeal to the individual's sensibilities and professional objectives, be they skills, expertise or shared vision. The individual is 'taken under the wing' of the mentor and helped to reach their career goals and make networks. This relationship can be ongoing and a point of reference throughout that individual's career.

### What is coaching?

Coaching is a method of improving individual or team performance through direction and instruction in order to learn a particular skill or work towards a set goal. It usually involves an external expert or coach who is bought in to work on a particular issue. This can be achieved through workshops, seminars and supervised practice. As applied in the mental health field, the key to coaching is the focus on one's goals and vision.

Table 4 - Supervision and support strategies available to organisations

	Line Management	Supervision	Mentoring	Coaching
Focus	Meet policies and procedures of the organisation	Build good practice in clinical skills; skill & knowledge acquisition	Career development and psychological support	Learning specific issues and skills
Delivery	Clear delineation with job descriptions and organisational chart	Clear contract – can be internal or external supervisor	Supported by the organisation	Clear contract with outside expert
Target group	Individual	Can be done on individual or group basis	Primarily on an individual level but can be done as a group	Learning and progression for individual or team around issue
Outcomes	Against agreed performance standards	Improved and current clinical practice; service delivery that follows best practice standards, increased insight/knowledge	Guidance on developing career path and making career forwarding choices	Improvement in specific skills required for role

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## Reflective practice

Reflective practice is a professional development technique that involves thoughtfully considering one's own experiences in applying knowledge to practice while being coached by professionals in the discipline.<sup>146</sup> It is a self-regulated and continuous process. It requires the individual to either:

- a) 'Reflect in action' - This involves looking to our experiences, connecting with our feelings and individual frames of reference or understanding, or 'thinking on our feet', or
- b) 'Reflect on action' - This involves 'turning the mind back' onto something to explore why we acted the way we did, e.g. writing about it, talking about it with a supervisor.

Reflective practice is a unique part of staff development and service delivery in the community mental health sector. It should be enmeshed in all organisational practices, e.g. supervision, evaluation, performance management, cultural competence, and forming partnerships. **Reflective practice in supervision provides a unique opportunity for staff to be encouraged and supported to understand and incorporate the values and philosophies of the organisation, e.g. genuine consumer and carer participation, cultural sensitivity, recovery-oriented services and evidence-based practice.**

## Why is supervision important?

Much of the literature on supervision is from a clinical framework, e.g. drawn from the broader health and other fields, such as psychology, social work, psychiatric nursing or alcohol and other drug (AOD) settings, and as such there is little supervision material with a specific mental health focus<sup>147</sup>. However, although community mental health staff are not always operating in a clinical environment there are many aspects of clinical supervision which will be shared with supervision as it happens in this sector.

The main objectives of supervision programs are to<sup>148</sup>:

- To provide support to staff
- To give advice
- To allow the sharing of ideas and resources
- To ensure good practice as outlined in the current literature
- To ensure that workers maintain ethical boundaries
- To facilitate professional development
- To enhance staff communication and sense of cohesiveness
- To maximise staff morale and retention
- To maintain the highest possible standards for consumer outcomes

The benefits of supervision are<sup>149</sup>:

- Organisations that support continuous learning
- Staff that feels supported
- Organisations that support professional and personal growth for staff
- Improved staff communication
- Increased confidence of staff
- Reduced burnout
- Increased job satisfaction
- Quality practice
- Ongoing reflective practice

The main challenges associated with supervision are<sup>150</sup>:

- The cost of supervision
- Encouraging staff to participate
- Finding appropriately experienced supervisors
- Time constraints
- Competing demands on resources

If managers are clear on the process of supervision and their role within the process, then this will filter down the organisation to all workers. Supervision requires both a 'bottoms up' and a 'top down' approach - that is, it is the workers responsibility to approach the manager to seek access to supervision as part of staff development, just as it is the manager's responsibility to ensure staff are accessing supervision at a required minimum level (that is, it becomes part of their performance plan), and the structures are in place to support this.<sup>151</sup>

## What is good practice in supervision?

The guidelines below are drawn from the AOD field. Whilst there may be some variations within the community mental health setting, it allows managers to be clear on the existing or future supervision program. Supervision should<sup>152</sup> :

- Consist of a mix of individual and group supervision
- Be conducted in a one- on- one (individual supervision) setting at least monthly with sessions lasting between one and two hours
- Ideally employ a supervisor external to the agency, preferably one that has been chosen or agreed upon by the staff member(s) that are being supervised
- Involve a formal contract between the supervisor and the agency that is reviewed at least annually through evaluation and feedback from staff
- Be incorporated into staff work plans and performance agreements

There are several ways of recruiting a clinical supervisor:

- Advertising in a local paper
- Inter-agency networking - Approaching other community mental health organisations that may have access to or employ staff who could act as clinical supervisors
- Word of mouth

Table 5 - Internal versus external supervision - Pros and Cons

	<b>Internal supervision</b>	<b>External supervision</b>
<b>Pros</b>	<ul style="list-style-type: none"> <li>- Understands the organisation</li> <li>- 'Insider knowledge', expertise or experience specific to your area of work</li> <li>- Easily accessible</li> <li>- A person who is familiar to you and your needs</li> <li>- Possibly shares similar interests/ career goals</li> <li>- Lower costs - resources needed for supervision readily available</li> <li>- Easier to organise/set up</li> <li>- Opportunity for a staff member to increase their role/responsibility by taking on a supervisor position</li> </ul>	<ul style="list-style-type: none"> <li>- Brings new knowledge and experience to the organisation</li> <li>- 'Outsider view' of things</li> <li>- Recruit from a wider pool of appropriate supervisors, and more opportunity to be selective in your final choice</li> <li>- Clear contracts and agreements set up</li> <li>- May be less subjective in supervisory process</li> <li>- Workers may feel more comfortable speaking honestly and openly to them</li> <li>- Existing staff do not need training</li> </ul>

<b>Cons</b>	<ul style="list-style-type: none"> <li>- Conflict of interest could arise, due to role confusion</li> <li>- May lack objectivity</li> <li>- Staff feel less comfortable disclosing/sharing information for fear of being shamed or reprimanded</li> <li>- Contracts/protocols more easily overlooked</li> <li>- 'Match' between supervisor and worker may be less rigorous</li> <li>- Time needed to train supervisors may take away from time spent on other tasks/service delivery</li> </ul>	<ul style="list-style-type: none"> <li>- Cost</li> <li>- 'Remote', i.e. contact is less frequent</li> <li>- Professional values may not be congruent with the organisation's values</li> <li>- Significant orientation and induction needed to the organisation, its goals, objectives, staff members, structure, etc.</li> </ul>
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External supervision can be supplemented by internal practices, such as:

- Regular case review team meetings
- Peer supervision
- Interagency meetings
- Staff appraisals/peer review
- Internal and external training
- Regular line management supervision regarding policies, procedures and daily practice
- Reflective practice - personal and organisational

**What should an agreement between supervisor and supervisee contain?** 

- Goals for supervision
- Expected outcomes of supervision
- Mutual obligations in the supervision process
- Structure of supervision
- Evaluation processes
- Limits of confidentiality
- Ethical issues
- Content of supervision

**What is good practice in mentoring?**

Managers are in a good position to act as mentors or to facilitate mentoring relationships within the workplace.<sup>153</sup> Managers are in a position to recognise workers' needs and offer opportunities to build on strengths and address weaknesses. They also work closely with staff and share similar goals and values.<sup>154</sup> All of these reasons lend themselves to the spontaneous development of a mentoring relationship.



## Workplace example - Supervision at Aftercare's HASI2 Program

### Background

The Supervision Program has been developed over the last 2 years, by Housing and Accommodation Support Initiative (HASI) management, in consultation with staff. As HASI is a relatively new service, the different components have evolved, according to the changing needs of HASI staff and management.

The initial program consisted of informal individual internal supervision with a Team Leader, and group-based external clinical supervision. However, as the service and its staff have developed, a more formalised supervision program was established, and more opportunities for professional development have been created through the implementation of a coaching program, and 'Quarterly Recovery' Workshops.

### Structure

At present, the Supervision Program at HASI2 consists of 4 components, each with a specific purpose and goals:

#### 1) Internal Supervision

- Regular, fortnightly individual supervision with the Team Leader ensures staff are supported in all areas of their work (client issues, administration, current projects, management, collegial concerns, training and development, etc) thereby enhancing staff productivity and reducing burnout.

#### 2) External Clinical Supervision

- Monthly group clinical supervision provided by a qualified supervisor allows staff the opportunity to discuss client issues, ethical issues, to reflect on their work, and to monitor their self care.

#### 3) Coaching

- The coaching program provides experiential learning for staff, to improve their understanding of the client's experience in recovering from mental health problems. This provides staff with an additional dimension to their intervention and interactions with clients, as well as speeding up their own personal and professional development.
- The coaching program utilises the same framework of "Collaborative Recovery" which is implemented with HASI clients. Therefore, in collaboration with the Service Manager, the staff member will clarify personal values, create a compelling personal vision, set meaningful and manageable goals, and determine specific action steps towards achieving those goals.
- By applying the recovery process to themselves, staff can develop a better understanding of the processes and challenges which face HASI clients in improving their lives.

#### 4) Quarterly Recovery Meetings

- Quarterly Recovery Meetings are 1 day workshops, attended by all Outreach Service staff. The agenda is determined by the Service Manager and may include guest speakers, presentations by selected staff members, and activities designed to improve skills, and explore themes relating to mental health recovery.
- Quarterly Recovery Meetings help to inspire, engage, and stimulate staff to consistently improve their practice, and help to maintain a consistent recovery philosophy across Aftercare services.

## **Challenges**

The main challenges faced in implementing this program have concerned the time required to conduct the various activities, and weighing this against the immediate needs of clients. Both staff and management would agree however, that the various supervision and coaching activities ultimately support our clients by better preparing staff in terms of skills, knowledge, empathy, and personal well being.

The practical issues surrounding time management have been largely dealt with by utilising personal Outlook calendars available on Windows software. The Team Leaders have access to all staff calendars, and are responsible for sending notice of all supervision sessions, training courses, and workshops scheduled. Where possible, regular appointment times are kept to assist staff in maintaining structured work routines.

Management has been consistent and vocal in its commitment to all aspects of the Supervision Program, which has helped to send the message to staff that this program will continue indefinitely, and that staff are expected to participate as part of their role and responsibilities.

## **Benefits**

The benefits of the Supervision Program have far outweighed the challenges faced in establishing it. In a recent staff survey, 90% of HASI2 staff reported strong job satisfaction, and 85% report strong organisational commitment. Furthermore, HASI2 scored 100% on questions concerning 'Supervision' ("My manager listens to what I have to say", "My manager gives me help and support"). HASI2 also scored high on performance appraisal, personal relations, innovation, and career opportunities.

Staff has also expressed great appreciation for such a comprehensive Supervision Program, and particularly enjoy the supervision and coaching components of the program. Management note that the program helps to make staff feel valued, and in return, high morale fosters productivity and commitment.