



SAFEGUARDING SUPERVISION POLICY

DOCUMENT INFORMATION	
Author:	Linda Williams
Ratifying Committee/Group:	Safeguarding Committee
Date of Ratification:	11 November 2022
Date of Issue:	21 November 2022
Review Due By:	11 November 2023
Version:	2.0

TABLE OF CONTENTS

1.	INTRODUCTION AND BACKGROUND.....	3
2.	SCOPE	3
3.	AIM	3
4.	ROLES AND RESPONSIBILITIES	4
4.1	Trust Board.....	4
4.2	Chief Executive.....	4
4.3	Executive Director.....	4
4.4	Non-Executive Director	4
4.5	Managers and Supervisors	5
4.5.1	The Associate Director of Safeguarding.....	5
4.5.2	Named Professionals.....	5
4.5.3	Line Managers.....	6
4.6	All staff	6
5.	DEFINITIONS	6
6.	LEGAL FRAMEWORK.....	7
7.	SAFEGUARDING SUPERVISION	7
7.1	The Supervision Process	7
7.2	Functions of safeguarding supervision	7
7.3	Safeguarding Supervision Structure.....	8
7.4	Types of Safeguarding Supervision	9
7.4.1	Planned 1:1 safeguarding supervision	9
7.4.2	Responsive safeguarding supervision.....	10
7.4.3	Group safeguarding supervision	10
7.5	Group Safeguarding Supervision	10
7.6	Preparing for Safeguarding Supervision.....	11
7.7	Agreed Plans and Action Points.....	12
7.8	Confidentiality	12
7.9	Record Keeping of Safeguarding Supervision.....	13
8.	TRAINING.....	13
9.	EQUALITY AND DIVERSITY	13
10.	MONITORING.....	14
	Monitoring and Audit.....	14
11.	CONSULTATION AND REVIEW.....	14
12.	IMPLEMENTATION	14
13.	REFERENCES AND ASSOCIATED DOCUMENTATION.....	14
14.	APPENDIX 1.....	15
	Record Template for Group Supervision.....	15
15.	APPENDIX 2.....	17
	Record Template for One to One Supervision	17
16.	APPENDIX 3.....	19
	Equality Impact Assessment Form Section One – Screening	21

1. INTRODUCTION AND BACKGROUND

South Central Ambulance Service NHS Foundation Trust (SCAS) is committed to ensuring that all staff receive appropriate support to effectively fulfil their responsibilities to the safeguarding of children, young people, adults at risk and their families. Staff should read this policy in conjunction with Trust Safeguarding policies Children and Adults. Safeguarding supervision is an accountable process where individuals are encouraged to reflect, explore and evaluate their own practice, identify and acknowledge the emotional impact of their work while receiving support, guidance and development in a safe, protected environment.

Working to ensure that children are safeguarded is demanding and requires sound professional judgements to be made. It may also be distressing and stressful for the professionals involved. Working Together to Safeguard Children 2018 states:

Safeguarding Supervision is an accountable process which supports, assures and develops the knowledge, skills and values of an individual, group or team. The purpose is to improve the quality of their work to achieve agreed objectives and outcomes Effective professional supervision can play a critical role in ensuring a clear focus on a child's welfare. Supervision should support professionals to reflect critically on the impact of their decisions on the child and their family'.

A safeguarding supervisor must have recognized safeguarding supervision training in order to effectively provide supervision.

2. SCOPE

This policy applies to all employees and workers of South Central Ambulance Service NHS Foundation Trust (SCAS), including secondees into and out of the organisation, volunteers, trainees, contractors, and temporary workers, including those working on a bank or agency contract. For ease of reference, all employees and workers who fall under these groups will be uniformly referred to as 'staff' in this document.

3. AIM

This policy sets out the framework for the provision of safeguarding supervision within the Trust. The aims and objectives of this policy are to promote a culture that values and engages in safeguarding supervision in order:

- To deliver a person-centred framework that champions the best interests and safety of children, young people and adults at risk
- To enable individuals and groups to access safeguarding supervision when they identify a need
- To ensure individuals have clarity with regard to their roles, responsibilities and accountabilities and to always advocate best practice
- To encourage the learning and development of individuals
- To support individuals in identifying any emotional impact of their work
- To develop a climate that promotes equal opportunities and anti-discriminatory practice
- To provide a safe environment where trust and confidentiality are appropriately maintained

4. ROLES AND RESPONSIBILITIES

4.1 Trust Board

The Board has ultimate responsibility for ensuring that this policy and associated procedures are in place and complied with to protect patients and service users.

The Board will assure itself of compliance with this policy through the accountability arrangements delegated to the Executive Director of Patient Care and Service Transformation / Chief Nurse and via consideration of the metrics described within the SCAS Safeguarding Dashboard and associated reports to the Quality and Risk Committee and via consideration of an annual safeguarding report prepared by the Associate Director of Safeguarding and endorsed by SCAS Safeguarding Committee.

The Board has ultimate responsibility for ensuring that an effective system for managing any risks associated with safeguarding exists within SCAS and that all staff working in SCAS are aware of and operate within the policy

4.2 Chief Executive

SCAS Chief Executive (CEO) is ultimately accountable for the protection of children, young people and adults at risk. The CEO provides strategic leadership, ensures that the role and responsibilities of the Board in relation to safeguarding are met, promoting a culture of supporting good practice and excellence with regard to safeguarding within the organisation and promotes collaborative working with other agencies

4.3 Executive Director

The Executive Director of Patient Care and Service Transformation / Chief Nurse is the nominated Director at board level responsible for reporting to the Board on safeguarding issues, providing assurance that the organisation is meeting its safeguarding requirements on an annual basis, promoting initiatives to ensure that SCAS has robust arrangements for safeguarding and providing leadership in the long term.

The Executive Director of Patient Care and Transformation / Chief Nurse has individual responsibility for ensuring that safeguarding policies and associated procedures exist; that both are implemented effectively; that all staff are aware of and operate within the requirements of the policies and procedures and that systems are in place for the effective monitoring of the standards contained within the policies.

4.4 Non-Executive Director

The CEO will align Safeguarding to the portfolio of a Non-Executive Director. The Non-Executive Director will act as 'champion' for safeguarding, will ensure appropriate scrutiny of the Trust safeguarding performance and will provide assurance to the Board.

4.5 Managers and Supervisors

4.5.1 The Associate Director of Safeguarding

The Associate Director of Safeguarding will provide strategic leadership and expert practice and support to manage any serious safeguarding issues, will strategically lead operational improvements, innovations and best practice, monitoring the quality and effectiveness of services against performance indicators and standards.

The Associate Director of Safeguarding will apply conflict resolution processes in cases of

disagreement regarding thresholds for intervention; will provide support to the Designated Senior Manager in the management of allegations against staff providing expert safeguarding advice as required; will maintain management oversight of significant incidents where there are issues of safeguarding children and ensure dissemination of lessons learnt from safeguarding children practice reviews, multi-agency audit, and domestic homicide reviews involving children and advise on the implementation of recommendations.

The Associate Director of Safeguarding will encourage and nurture a culture of case discussion, reflective practice and the monitoring of significant events at a local level.

The Associate Director of Safeguarding is responsible for ensuring they receive appropriate safeguarding supervision.

4.5.2 Named Professionals

SCAS is required to have a Named Professional for Safeguarding Children and for Safeguarding Adults. This is a key role in promoting good professional practice within the organisation providing advice and expertise for staff members and ensuring safeguarding training is in place. The Named Practitioner will work closely with the Executive Director, the Associate Director of Safeguarding and designated health professionals for the health economy and will be the organisational lead for Looked After Children and Child Sexual Exploitation incorporating Missing Exploited and Trafficked.

The Named Practitioner will provide highly specialised advice, support, supervision and training, helping to raise the standard and quality of care and improved outcomes for children and young people. They will also assist SCAS to understand its safeguarding and protection of children role and responsibilities and meet its statutory duties in line with section 11 of the Children Act 2004.

The Named Practitioner is responsible for ensuring that there are systems and processes in place including the development of policies, procedures and guidance/protocols that are compliant with primary legislation, national, regional and local government strategy relating to safeguarding.

The Named Practitioner is responsible for ensuring they receive appropriate safeguarding supervision. In line with safeguarding guidance and the contractual framework, SCAS supports and advises Named Practitioners to access external safeguarding supervision from the appropriate Designated Professional.

4.5.3 Line Managers

Line managers will be responsible for:

- Contribute to the dissemination and implementation of this policy
- Develop and promote training needs and priorities
- Provide/ensure provision of effective safeguarding appraisal, support, peer review and supervision for staff
- Ensure all staff within their department are aware of this policy and the process to be followed in the event of suspected abuse of a child or young person
- Ensure all staff have access to the appropriate level of training as defined in the SCAS Safeguarding Training Strategy and training needs analysis
- Provide routine management supervision assuring core competencies in safeguarding practice
- Manage any immediate safeguarding and protection issues
- Co-ordinate referral and safe transfer of responsibilities
- Co-ordinate any alternative action plans
- Ensure staff in their areas meet mandatory training requirements in safeguarding and provide support to those making safeguarding referrals

4.6 All staff

All members of staff have a statutory duty to safeguard and promote the welfare of children and adults, including:

- Adherence to this policy and associated procedures
- All staff are responsible for recognising and responding to allegations of abuse by ensuring that they refer their concerns or assist in the referral
- All staff should contribute to whatever actions are needed to safeguard and promote the welfare of children and young people and take part in regularly reviewing the outcomes for the child or young person against specific plans and outcomes
- Being alert to the possibility of child abuse and neglect through their observation of abuse, or by professional judgement made as a result of information gathered about the child
- Knowing how to deal with a disclosure or allegation of child /adult abuse
- Undertaking training as appropriate for their role and keeping themselves updated
- Being aware of and following the local policies and procedures they need to follow if they have a child concern
- Ensuring appropriate advice and support is accessed either from managers or SCAS safeguarding team
- Participating in multi-agency working to safeguard the child or adult (if appropriate to role)
- Ensuring contemporaneous records are kept at all times and record keeping is in strict adherence to SCAS policy and procedures and professional guidelines
- Ensuring that all staff and their managers discuss and record any safeguarding issues that arise at each supervision session

5. DEFINITIONS

All definitions used within this policy are explained throughout.

6. LEGAL FRAMEWORK

Responsibilities for safeguarding are enshrined in legislation. This policy has been informed by all relevant guidance (statutory and non-statutory) that seeks to protect children and young people including:

- Children Act (1989)
- Children Act (2004)
- Children and Families Act (2014)
- The Human Rights Act (1998)
- “Safeguarding Children, Young People and Adults at Risk in the NHS: Safeguarding Accountability and Assurance Framework (2019)
- Promoting the Health and Well-being of Looked After Children – statutory guidance (2015)
- Children and Social Work Act (2017)
- Working Together to Safeguard Children (2018)
- Information Sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (2018)
- General Data Protection Regulation (GDPR) & Data Protection Act (2018)
- Domestic Abuse Act (2021)

7. SAFEGUARDING SUPERVISION

7.1 The Supervision Process

All SCAS staff members have a responsibility to seek safeguarding supervision if they are concerned about the welfare of a child and / or adult at risk and require support and advice about whether action is needed to safeguard.

Safeguarding supervision is complementary to, but separate from, managerial supervision, which is about monitoring and appraising the performance of staff. Where additional safeguarding supervision is sought, feedback should be given to the member of staff's manager to inform their own management supervision.

7.2 Functions of safeguarding supervision

- 7.2.1 Safeguarding supervision uses the supervisory relationship to promote positive outcomes for children, families and adults at risk through creating a safe contained environment where the practitioner has the capacity to think and reflect
- 7.2.2 It enables the practitioner to take responsibility for their own practice and respond to the safeguarding needs of children, families and adults at risk
- 7.2.3 It enables the individual to reduce the negative impact of human factors on their performance through the recognition of personal triggers and the personal and organisational resources they have to support them in developing and sustaining resilience in the face of challenging and complex work

- 7.2.4 It facilitates recognition of gaps in knowledge and skills needed for effective safeguarding practice
- 7.2.5 It challenges discrepancies in thinking processes e.g. biases and assumptions
- 7.2.6 It enhances the ability of practitioners to work effectively with colleagues and within their own organisation and support changes in behaviour that have led to ineffective relationships
- 7.2.7 Safeguarding supervision enables the supervisee to reflect on certain situations that may require a deeper understanding of how human behaviour and our own interactions with others are having an impact on those situations.
- 7.2.8 It contributes to organisational responsibility for competent accountable performance
- 7.2.9 It promotes and develops competence and skill in safeguarding practice
- 7.2.10 It helps to maintain a focus on the child or adult at risk
- 7.2.11 It helps to avoid the potential for 'drift'/delay
- 7.2.12 It provides an opportunity for exploring professional difference and challenging fixed views
- 7.2.13 It helps to review the evidence-base for agreed actions and decisions
- 7.2.14 It helps to address the emotional impact of the work

7.3 Safeguarding Supervision Structure

- 7.3.1 Safeguarding supervision should be provided within a structured process. Good practice requires an experienced supervisor with knowledge of safeguarding appropriate to the context in which the supervisee works. Supervisors should be supported in accessing additional training and guidance from the safeguarding lead(s) within the organisation that hold responsibility for fulfilling the requirements of statutory legislation and guidance.
- 7.3.2 Safeguarding supervision should be provided by an appropriately experienced supervisor. SCAS will be assured that supervisors are identified within the organisation and will be deemed to be sufficiently competent and confident in working with others to assure the safety of patients and service users. Any member of staff providing safeguarding supervision is required to have undertaken appropriate training in accordance with the Safeguarding Training Strategy.
- 7.3.3 Some groups of staff will have regular, planned, protected time and space for safeguarding supervision whether this is on a one-to-one or group basis. This

should be uninterrupted time that is a priority for both the supervisor and supervisees. Dates and times should be planned in advance and prioritised.

- 7.3.4 A written record should be kept of each session in line with this policy and agreed processes. Safeguarding supervision records are the property of the organisation and the organisation has access to supervision records for audit or inspection purposes (Appendices 1 & 2). Refer to section 7.8 for confidentiality requirements regarding supervision records.
- 7.3.5 Decisions relating to children, young people and adults at risk should be recorded as soon as possible and within two working days of the decision being made (unless an immediate response is required). Safeguarding supervision records will be kept securely by SCAS in line with policies and procedures. (Appendices 1 & 2)
- 7.3.6 Professionals should receive regular safeguarding supervision in accordance with their role and, as a minimum every six months for one hour (more frequently for staff groups if required).
- 7.3.7 An open culture of learning and development and commitment to continuous improvement in practice should be promoted.
- 7.3.8 There is a duty to escalate the following concerns should they arise within safeguarding supervision discussion:
- Child / adult may be at risk of significant harm
 - There is unsafe practice placing people at risk
 - There is illegal activity
- 7.3.9 The more stressful aspects of case management may require debriefing processes to explore the emotional aspects outside of formal safeguarding supervision.

7.4 Types of Safeguarding Supervision

The Safeguarding Named Practitioners and Specialist Practitioners will offer drop in supervision / de-brief sessions to all SCAS departments at the request of the department managers to provide information about safeguarding and to encourage individuals to access safeguarding formal supervision if a need is identified.

7.4.1 Planned 1:1 safeguarding supervision

This is planned supervision with a safeguarding supervisor within the organisation. The supervisee presenting cases for discussion will be responsible for implementing any agreed actions. The safeguarding supervisor should provide assurance that the supervision is taking place and provide feedback as per organisational policy. For one-to-one safeguarding supervision, there should be a written agreement that explains the purpose of the safeguarding supervision, its value and importance in developing practice

and the roles of the supervisor and supervisee.

7.4.2 Responsive safeguarding supervision

This refers to requests made from any professional to a safeguarding professional for advice and support on safeguarding issues when they have concerns about a child, family or adult at risk.

This advice should be sought as and when issues arise and should not be delayed by waiting for regular planned supervision. The supervisee presenting any cases for discussion will be responsible for implementing any agreed actions. The safeguarding supervisor should provide assurance that the supervision is taking place and provide feedback as per organisational policy.

7.4.3 Group safeguarding supervision

Group supervision can be utilised with any team that has common caseloads or across teams where staff report safeguarding challenges or issues. The purpose of group supervision is to support the team in working effectively to ensure the most appropriate care provision and to promote a consistent and a cohesive approach. Cases are discussed constructively to improve practice. This could include learning points from internal reviews, Safeguarding Children Practice Reviews, Safeguarding Adults Reviews and changes in policies and protocols.

7.5 Group Safeguarding Supervision

7.5.1 The Supervisor and Supervisees will attend the agreed session on time at the mutually agreed venue. The Supervisor will ensure that the environment is suitably private and free from interruption.

7.5.2 The Supervisor will explain the principles of safeguarding supervision to the Supervisees in conjunction with their responsibilities when working with children, young people, vulnerable adults and their families.

7.5.3 The Supervisor will bring to the session a Safeguarding Supervision Record (see Appendix 1). This outlines the expected contents of the Supervision session. The length of the session will be agreed from the outset.

7.5.4 The Supervisor will summarise the Group's objectives. If the Group has been formed to address a particular issue, the Supervisor will ensure that time is given to ensure this need is met but should not be a barrier to discussing other issues and situations that may arise. The Supervisor will set aside time at the end of the session to state conclusions reached and action points agreed by the Group.

7.5.5 The Supervisor will make clear from the outset that all Supervisees are expected to actively participate in discussion but that supervisees should feel comfortable with and supported in what they share. If it is felt or identified that an individual's issue is more appropriate for another forum, such as individual safeguarding

supervision, the Supervisor or Supervisee can recommend / request this.

- 7.5.6 It is the joint responsibility of the Supervisor and Supervisees to treat each other with courtesy and respect and to ensure that all supervisees are given the opportunity to speak about their own experiences and contribute to the Group.
- 7.5.7 The Supervisor will lead the Group and encourage Supervisees to explore and reflect on issues and situations raised.
- 7.5.8 The Supervisor will close the session by using time set aside to summarise themes discussed, conclusions reached and mutually agree any action points to be taken forward from the session.
- 7.5.9 The Supervisor will record action points to be taken forward in the Safeguarding Supervision Record (Appendix 1).

7.6 Preparing for Safeguarding Supervision

- 7.6.1 Supervisees will be expected to identify cases to be discussed in safeguarding supervision in advance of the safeguarding supervision session.
- 7.6.2 Supervisors will arrange an appropriate venue, date and time for safeguarding supervision to take place and mutually agree this with the supervisee(s). This venue will be a safe space, free from interruption so that confidentiality can be maintained throughout the session.
- 7.6.3 Both Supervisee and Supervisor will attend the agreed session on time at the mutually. The Supervisor will ensure that the environment is suitably private and free from interruption.
- 7.6.4 The Supervisor will explain the principles of safeguarding supervision to the supervisee in conjunction with their responsibilities when working with children, young people, vulnerable adults and their families.
- 7.6.5 The Supervisor will bring to the session a Safeguarding Supervision Record (Appendix 2). This outlines the expectations of the content of the supervision session. The length of the session will be agreed from the outset. Both parties will abide by the terms agreed within the Agreement and sign the Agreement at the start of the session.
- 7.6.6 The Supervisor will seek to understand the experience of the Supervisee from the Supervisee's perspective.
- 7.6.7 The Supervisor will encourage the Supervisee to reflect on their experience and provide objective analysis in a supportive manner.
- 7.6.8 The Supervisor will assist the Supervisee in identifying their strengths and areas for support and development. It may be appropriate for the Supervisor to signpost the Supervisee to other staff support services available that may go further to addressing the needs of the Supervisee (e.g. further training, counselling and seeking specialist guidance etc.)
- 7.6.9 The Supervisor will be expected to challenge the Supervisee's decision-making where required but feedback will be constructive and evidence-

based.

7.6.10 The Supervisor and Supervisee will mutually agree any plans and action points to be carried forward. These will be recorded on the Safeguarding Supervision Record and both parties will sign this. The Supervisor will ensure that the needs of the Supervisee are met within the framework of safeguarding supervision but will explain that the Supervisor is not necessarily responsible for addressing any agreed action points. Both Supervisor and Supervisee will also agree where information can be shared with others to address these action points.

7.6.11 Any concerns that require escalation outside of the safeguarding supervision framework will be discussed by the Supervisor and the Supervisee. This will be recorded in the Safeguarding Supervision Record.

7.6.12 The Supervisee and Supervisor should keep a copy of the Safeguarding Supervision Record for their own reference.

7.7 Agreed Plans and Action Points

7.7.1 All agreed action points from safeguarding supervision will be recorded in the Supervisee's Safeguarding Supervision Record (Appendix 1 & 2).

7.7.2 Action points should be brief and it may be required to identify whose responsibility it is to progress a specific point or date to complete.

7.7.3 Issues raised within the safeguarding supervision framework are likely to be complex and wide-ranging, as such action points may also be varied. Examples of agreed action points may include but are not limited to the following:

- No further action as safeguarding supervision itself has addressed the needs of the Supervisee within the session
- Training and development need identified
- Seek further guidance relating to a need outside of the framework or from a specialist safeguarding team member
- Signposted Supervisee to other staff support available within the Trust
- Follow-up with further safeguarding supervision
- Identified a safeguarding referral needs to be made regarding a specific case (e.g. retrospective referral via the safeguarding team)
- Escalation required

7.8 Confidentiality

Anything discussed between the Supervisor and Supervisee within the framework of safeguarding supervision is confidential and information shared requires the consent of both parties. However, any agreed action points between the Supervisor and Supervisee will be documented on the Supervision Record. The Supervision Record will only be accessible to the Supervisee, Supervisor, Named Practitioners and Safeguarding Specialists for audit purposes.

Professional accountability is a key element of safeguarding children and vulnerable adults. If the Supervisor identifies a risk to staff or children, young people and vulnerable adults, information may need to be shared with the Associate Director of Safeguarding.

If issues that relate to professional practice are identified in safeguarding supervision and cannot be resolved within the process, this will be discussed with the Supervisee and a plan made together as to how to resolve the issue. Escalation may be required to the Associate Director of Safeguarding and/or the Supervisee's line manager. The Supervisee will be consulted if disclosure is necessary.

7.9 Record Keeping of Safeguarding Supervision

All Safeguarding Supervision Agreements and Safeguarding Supervision Records will be stored safely in safeguarding confidential files with access by all group members if required.

The Named Practitioners and Specialist Practitioners will have access to the records to monitor compliance and for audit purposes. A centralized record of safeguarding supervision activity will be maintained. Compliance/completion will be monitored against the safeguarding assurance trajectory.

Supervisors and Supervisees are advised to keep their own notes from safeguarding supervision being mindful of the requirements for confidentiality and in line with Trust policies relating to the security of information and good governance.

8. TRAINING

SCAS will ensure that all staff receive essential safeguarding training in line with SCAS Safeguarding Training Strategy and Training Needs Analysis 2022 – 2024.

Each area will maintain records of compliance for their own staff in line with the Safeguarding Training Strategy and Training Needs Analysis.

9. EQUALITY AND DIVERSITY

The Trust is committed to promoting positive measures that eliminate all forms of unlawful or unfair discrimination on the grounds of age, marriage and civil partnership, disability, race, gender, religion/belief, sexual orientation, gender reassignment and pregnancy/maternity or any other basis not justified by law or relevant to the requirements of the post. The Trust will therefore take every possible step to ensure that this procedure is applied fairly to all employees.

The Trust values differences between members of the communities we serve and within its existing workforce, and actively seeks to benefit from their differing skills, knowledge, and experiences to ensure equality of opportunity and diversity and remove any barriers that could potentially discriminate. Employees exercising their rights and entitlements under these regulations will suffer no detriment as a result. The Trust is entrusted to promoting equality and diversity best practice both within the workforce and in any other area where it has influence.

10. MONITORING

SCAS Safeguarding Committee will monitor this policy through a system of audit and case review.

Monitoring and Audit

Criteria	Method	By	Committee	Frequency
Outcome of supervision	Audit	Named Practitioner	Safeguarding	Yearly
Voice of child	Audit	Named Practitioner	Safeguarding	Yearly
Making Safeguarding Personal	Audit	Named Practitioner	Safeguarding	Yearly

11. CONSULTATION AND REVIEW

This policy document is due for review in one year unless new legislation, a Safeguarding Partnership board(s) directive or learning from a serious incident requires earlier review.

12. IMPLEMENTATION

This policy will be launched by SCAS Safeguarding Service as part of a suite of revised and newly developed safeguarding policies. This will be through a programme of team meetings and seven minute briefings.

13. REFERENCES AND ASSOCIATED DOCUMENTATION

South Central Ambulance Service NHS Foundation Trust:

- Safeguarding Strategy 2022
- Safeguarding Training Strategy & Training Needs Analysis
- Safeguarding Adults Policy 2022
- Prevent Policy and Procedures 2022
- Mental Capacity Act Policy 2022
- Management of Allegations Against Staff Policy and Procedures 2022



14. APPENDIX 1

Record Template for Group Supervision

To be stored safely in safeguarding confidential files with access by all group members if required.

Record Template Group Supervision		
Details of child / adult		
Service area	Supervisor	Date of discussion
Professionals present		
Original Need & Concerns/Reasons for Current Involvement:		
How Are Needs Being Met Regarding:		
Ethnicity/Culture:		
Identified Special Needs:		

RISKS	SAFETY
<p>What Are We Worried About? Details of significant child / adult protection concerns, patterns & history that make you feel that the child / adult are at risk of present or future abuse &/or neglect.</p>	<p>What's Going Well? Consider all aspects that indicate safety & protection that relate to the risks e.g. strengths, resources, willingness & ability to make changes. Progress made / reasons to feel reassured that the danger/harm has got less. How has the child / adult been protected?</p>



--	--

What are the child's / adults views of their situation? How safe do they feel? How do we know?

--

Is there any missing information that needs to be pulled together or issues where further clarification/assessment is needed?

--

Agreed Plan of Action/Next Steps:

Who	What	When

Signatures:

--



15. APPENDIX 2

Record Template for One to One Supervision

To be stored safely in safeguarding confidential files with full access by safeguarding supervisee.

Record Template One to One Supervision
--

Details of child / adult		
Supervisee	Supervisor	Date of discussion
Original Need & Concerns/Reasons for Current Involvement:		
How Are Needs Being Met Regarding:		
Ethnicity/Culture:		
Identified Special Needs:		

RISKS	SAFETY
<p>What Are We Worried About? Details of significant child / adult protection concerns, patterns & history that make you feel that the child / adult are at risk of present or future abuse &/or neglect.</p>	<p>What's Going Well? Consider all aspects that indicate safety & protection that relate to the risks e.g. strengths, resources, willingness & ability to make changes. Progress made / reasons to feel reassured that the danger/harm has got less. How has the child / adult been protected?</p>



--	--

What are the child's / adults views of their situation? How safe do they feel? How do we know?
Is there any missing information that needs to be pulled together or issues where further clarification/assessment is needed?

Agreed Plan of Action/Next Steps:		
Who	What	When

Signatures:

16. APPENDIX 3



SAFEGUARDING CHILDREN SUPERVISION CONTRACT

Contract between:[Supervisee]
.....[Supervisor]

Date contract agreed:

Frequency of meetings: Quarterly

Duration of meetings: One hour

Location of meetings: As mutually agreed

Purpose:

- Ensure services are delivered competently and effectively to children and families.
- Support analysis and decision making in relation to safeguarding work.
- Promote effective communication, information sharing and multi –agency working.
- Provide clarity for the supervisee on their role and responsibilities.
- Support the supervisee in respect of their health and well-being at work, taking account of the challenging and sometimes distressing nature of safeguarding work and associated vicarious trauma.
- Support professional development.
- Provide the supervisee with a quality opportunity to reflect on safeguarding cases.

Ground rules/Parameters:

- Confidentiality and conditions under which this would be breached.
- Commitment to attending.
- What information can be shared –where, why, who with.
- Respect for one another.

Roles and responsibilities:

- Supervisee responsible for bringing issues to supervision to explore.
- Supervisor responsible for managing time, facilitating exploration of issues presented.
- Both responsible for turning up on time.
- Arrangements for cancelling/re-arranging etc.
- Supervisee responsible for ongoing management of the case and for following through plans / actions, unless the record clearly indicates that responsibility has been undertaken by the Supervisor.

Record Keeping:

- Individual supervision records:
 - Will be produced by the Supervisor and a copy provided to the Supervisee.
 - Will capture key themes / issues discussed.
 - Are owned and will be kept by the Supervisor.
- Group supervision records:
 - Will be produced by the Supervisor and a copy provided to all Supervisee's.
 - Will capture key themes / issues discussed.
 - Are owned and will be kept by the Supervisor.
- Case specific supervision records:
 - Will be produced by the Supervisor and a copy provided to the Supervisee.
 - Will capture issues discussed, analysis and any plans agreed.
 - Supervisee will ensure a copy is filed in the patient record.

Date for review of contract:

Signed: [Supervisee] **Date:**

Signed: [Supervisor] **Date:**

Intentionally Blank

Equality Impact Assessment Form Section One – Screening

Name of Function, Policy or Strategy: Safeguarding Supervision Policy

Officer completing assessment: Matthew Hargreaves

Telephone: 07866 205544

1. What is the main purpose of the strategy, function or policy?
Safeguarding Supervision is an accountable process which supports, assures and develops the knowledge, skills and values of an individual, group or team. The purpose is to improve the quality of their work to achieve agreed objectives and outcomes Effective professional supervision can play a critical role in ensuring a clear focus on a child’s welfare. Supervision should support professionals to reflect critically on the impact of their decisions on the child and their family’.
2. List the main activities of the function or policy? (for strategies list the main policy areas)
<p>This policy sets out the framework for the provision of safeguarding supervision within the Trust. The aims and objectives of this policy are to promote a culture that values and engages in safeguarding supervision in order:</p> <ul style="list-style-type: none"> • To deliver a person-centred framework that champions the best interests and safety of children, young people and adults at risk • To enable individuals and groups to access safeguarding supervision when they identify a need • To ensure individuals have clarity with regard to their roles, responsibilities and accountabilities and to always advocate best practice • To encourage the learning and development of individuals • To support individuals in identifying any emotional impact of their work • To develop a climate that promotes equal opportunities and anti-discriminatory practice • To provide a safe environment where trust and confidentiality are appropriately maintained
3. Who will be the main beneficiaries of the strategy/function/policy?
<ul style="list-style-type: none"> • All SCAS colleagues • Our Patients • The Organisation • Service Commissioners

		Positive Impact	Negative Impact	Reasons
GENDER	Women	x		<p>This policy is designed to provide a logical, clearly defined process for providing Safeguarding supervision. There is nothing within the policy and procedures that would apply to any groups with protected characteristics in a negative way. If there were circumstances which required any reasonable adjustments or to help realise an equitable outcome the policy is guided by the Equality Statement in Section 9</p> <p>Specific consideration is given to anyone covered by the Safeguarding Supervision Policy within section 9.</p> <p>Specific consideration is given to anyone covered by the Safeguarding Supervision Policy within section 9</p>
	Men	x		
RACE	Asian or Asian British People	x		
	Black or Black British People	x		
	Chinese people and other people	x		
	People of Mixed Race	x		
	White/white other	x		
DISABILITY	Disabled People	x		
SEXUAL ORIENTATION	Lesbians, gay men and bisexuals	x		
AGE	Older People (60+)	x		
	Younger People (17 to 25) and children	x		
RELIGION/BELIEF	Faith Groups	x		
	Equal Opportunities and/or improved relations	x		

Notes: Faith groups cover a wide range of groupings, the most common of which are Muslims, Buddhists, Jews, Christians, Sikhs and Hindus. Consider faith categories individually and collectively when considering positive and negative impacts.

The categories used in the race section refer to those used in the 2001 Census. Consideration should be given to the specific communities within the broad categories such as Bangladeshi people and to the needs of other communities that do not appear as separate categories in the Census, for example, Polish.

5. If you have indicated that there is a negative impact, is that impact:		
	Yes	No
Legal (it is not discriminatory under anti-discriminatory law)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Intended	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Level of Impact	High	Low
If the negative impact is possibly discriminatory and not intended and/or of high impact then please complete a thorough assessment after completing the rest of this form.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6(a). Could you minimise or remove any negative impact that is of low significance? Explain how below:		
If there were circumstances that had a negative impact of low significance or that required any reasonable adjustments or to help realise an equitable outcome the policy is guided by the Equality Statement in Section 9. In addition, there is oversight by the Safeguarding Committee		
6(b). Could you improve the strategy, function or policy positive impact? Explain how below:		
Continual monitoring of any potential negative impact by the Safeguarding Committee		
7. If there is no evidence that the strategy, function or policy promotes equality, equal opportunities or improves relations – could it be adopted so it does? How?		
This is outlined under section by the Equality Statement in Section 9		

Please sign and date this form, keep one copy and send one copy to the Trust's Equality Lead.
Signed: 27542296
Name: Matthew Hargreaves
Date: 14 November 2022