

CONNECTICUT VALLEY HOSPITAL OPERATIONAL PROCEDURE MANUAL

SECTION II:	ORGANIZATION FOCUSED FUNCTIONS
CHAPTER 8:	Management of Human Resources
PROCEDURE 8.55:	Supervision
REVISIONS:	04/01/10; 03/14/11; 03/12/12; 3/14/16; 2/6/17; Reviewed 06/18
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PURPOSE: To define supervision for all staff and its implementation at Connecticut Valley Hospital (CVH).

SCOPE: All CVH staff

Definition:

Supervision: CVH defines supervision (which includes both clinical and administrative components) as a relationship in which one individual has authority and responsibility for the work and work life of another. Supervisors are expected to operationalize this definition through the assurance that four core supervisory functions are regularly referenced in supervision: *1. quality of care; 2. administration; 3. professional development; and 4. support.* This helps to assure that supervisors are regularly monitoring the quality of care provided to CVH patients, assuring that it is person-centered and respectful, administrative tasks and compliance requirements are met, staff receive assistance with their individual professional development needs, and that relationships between the supervisor and supervisee are supportive, collaborative well bounded, and structured.

CVH recognizes there is a difference between clinical and administrative supervision. Clinical supervision is primarily focused on the quality of patient care and the professional development of the clinician. Administrative supervision is primarily focused on assuring employee understanding of hospital policies and procedures and having consistent measures for assessing compliance.

POLICY:

In order to maintain and improve the quality of patient care, CVH requires supervision in all facets of the care delivery system. Through supervision, staff are provided with the opportunity to collaborate with their supervisor on administrative and clinical issues, both for performance improvement and professional development.

PROCEDURE:

Clinical supervision consists of systematically presenting one's work to an experienced professional identified as a clinical supervisor. Such presentations may consist of clinical case reviews and discussions about interactions, direct observation by the supervisor, a review of

notes and documentation, and/or role playing and other strategies that support and promote person-centered care.

Administrative supervision consists of regular evaluation of supervisee performance as measured against CVH policies and procedures, DMHAS work rules, and Commissioner's policies. Supervision may occur in individual or group settings.

Clinical and Administrative Supervisor's Responsibilities

The supervisor maintains an ongoing awareness of the supervisee's work performance and/or areas needing development. In addition, the supervisor is responsible for providing the necessary instruction to facilitate effective performance, including:

1. Providing guidance and teaching in order to enhance skills, performance, and job satisfaction.
2. Collaborating with other supervisors in completing performance evaluations and assuring that staff members are carrying out clinical and administrative responsibilities according to professional standards, CVH and DMHAS Commissioner's Policy Statements, and DMHAS Work Rules.
3. Assisting the supervisee in achieving a broader understanding of the patients with whom they work.
4. Collaborating with other departments/committees/work groups to assure the quality of the supervisee's documentation.
5. Meeting minimally once per month in a group forum.
 - a. In a given month, individual meetings for each supervisee may be substituted or provided in addition to the group supervision.
 - b. Group supervision should include an agenda, minutes, and attendance. Minutes should be consistently made available for those unable to attend, along with an opportunity for staff to review and sign. Minutes should be maintained in a location for all supervisees to reference as needed. Due to the criticality of supervision and communication to the quality of care, regular group supervision monitoring shall be completed by the responsible manager.
6. Being available as needed to consult with individual supervisees.
7. Reviewing patients' clinical records to ensure professional standards are met and pertinent clinical issues are addressed. (for clinical supervision)
8. Maintaining up-to-date supervisory documentation files on assigned supervisees.
9. Reviewing time and attendance when applicable.

Clinical and Administrative Supervisee's Responsibilities

All staff are provided a supervisor at the time of their specific work assignment. The supervisee is responsible for the following:

1. Attend and participate in supervision sessions.
2. Review and sign the minutes for all unattended group supervision sessions.
3. In the case of clinical supervision, review documentation of their clinical work with their clinical supervisor.
4. Inform their supervisor in a timely manner of urgent situations and ethical or legal concerns.
5. Collaborate with the clinical supervisor to improve clinical skills and performance.
6. Implement supervisor's directives and provide feedback about their efficacy.

- **Supervision Guidelines**
Possible Agenda Construct

For purposes of consistency, consider formatting supervision agendas. Because we have many initiatives, it might be helpful to consider formatting supervision agendas to loosely reflect the organizational priorities and objectives. This helps all employees, to have an understanding of how their work fits into the “big picture”, the hospital’s goals and objectives.

A Sample Agenda may include:

1. Code of Conduct/Respect and Dignity
2. Recovery and Customer Service
3. Recruitment & Professional Development
4. Recent Accomplishments
5. Budget: Savings Ideas Overtime
6. New Ideas and Opportunities to Improve or Program/Department
7. Policy and Procedure Updates