

# Supervision Principles

This document outlines a series of overarching principles relating to clinical supervision developed as part of the Clinical Supervision Support Partnership program of Medical Deans of Australia and New Zealand (MDANZ), Confederation of Postgraduate Medical Education Councils (CPMEC) and Committee of Presidents of Medical Colleges (CPMC). The following principles have since been endorsed by all three organisations.

## 1. Capacity

Increasing the supervision capacity of the health system to deal with growing student and trainee numbers will require expanding settings into the private sector and increasingly into peripheral sites. It will require fostering of training and supporting the supervisors of the present and future, ensuring time for supervision, and developing incentives for existing supervisors.

### *Recommendations:*

- Supervision is formally acknowledged and understood to be a core element of clinical activity.
- Universities, Postgraduate Medical Councils (PMCs) and Specialist Medical Colleges utilise generic supervision courses at all levels of education in order to train clinicians, trainees and medical students in supervision.
- Universities, PMCs and Specialist Medical Colleges employ a consistent system to cross recognise generic supervisory training courses that meet relevant standards.
- Universities, PMCs and Specialist Medical Colleges involve the private sector in supervision, providing for medium and long-term student placements.

## 2. Health system

Trainees and their supervisors are employed in a variety of roles within health services. Health services are required to ensure that a process for appropriate supervision is in place.

### *Recommendations:*

- Health Services make supervision duties explicit in clinical job descriptions and evaluate these duties as part of formal performance reviews.
- Universities, the PMCs and Specialist Medical Colleges and/or Health Services establish supervision awards to recognise and encourage excellence.

## 3. Training

Supervisor training is important to improve the effectiveness and consistency of supervision and to support and up-skill clinicians in their supervisory roles.

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The Clinical Supervision Support Partnership program is a joint initiative of:

#### *Recommendations:*

- Universities, PMCs, and Specialist Medical Colleges ensure supervisor training is available in a variety of modalities in order to enable appropriate access to training for practitioners in all settings, particularly rural and remote.
- Universities, PMCs and Specialist Medical Colleges ensure that training resources for supervisors are available and provide supervisor training appropriate for the level of experience of the practitioner.
- Universities, PMCs, Specialist Medical Colleges and/or Health Services ensure that supervisors meet relevant supervision standards.
- Health Services develop mechanisms to actively support the training of their clinical staff in supervision.

#### **4. Networking and resources**

Along with training, supervisors need continuing support and networking to foster their supervisory role and to gain access to resources. Subject to adequate external resourcing;

#### *Recommendations:*

- A clinical supervision website is established which is current, evidenced based and well maintained.
- The clinical supervision website provides resources to enable supervisors to be trained in generic supervisory skills.
- The clinical supervision website is supported by a moderated discussion forum on a range of topics relating to supervision, enabling the development of an on-line community of practice.
- The clinical supervision website is supported and governed by a steering group comprising Universities, PMCs and Specialist Medical Colleges, which will ensure that this site is evaluated and improved at regular intervals

#### **5. Feedback and quality improvement**

Systematic feedback on supervision practices will help to drive change and provide a quantitative measure of improvement.

#### *Recommendations:*

- Health services and employers ensure adequate clinical supervision by building performance indicators into both individual position descriptions and departmental reporting requirements.
- Universities, PMCs, Specialist Medical Colleges and/or health services develop standardised systems to elicit accurate, useful student/trainee feedback to continually improve the quality of supervision.

## **6. Research**

Quality research is needed to further support the development of effective models for supervision and funding.

*Recommendations:*

- Universities, PMCs and Specialist Medical Colleges promote research which helps to further clarify the impact of supervisor training on clinical practice and effectiveness of training.

## **7. Advocacy**

Sufficient resources are essential to ensure appropriate supervisory training and practices both now and for the future.

*Recommendations:*

- Universities, PMCs and Specialist Medical Colleges advocate for the continual availability and improvement of supervision training.
- Universities, PMCs and Specialist Medical Colleges advocate for the development of inter-professional supervision training.
- Universities, PMCs and Specialist Medical Colleges collaborate and contribute to the development of National standards in relation to supervision.