

CLINICAL SUPERVISION INITIATIVE

Clinical supervision has long been recognized as a method to develop competence among clinical staff and help them to explore their interactions with clients, families and/or natural supports. Clinical supervision is separate from administrative supervision. It helps to ensure appropriate application of proven models or approaches to care. Since 2002, clinical supervision has been at the forefront of clinical practice at the DMHAS Southeastern Mental Health Authority (SMHA). A recent survey of SMHA clinical staff shows the value of clinical supervision.

Staff responded to the following questions:

- ✘ How has the present supervision process helped to increase your ability to care for others?
- ✘ In what ways has the current supervision process helped you to feel competent in the care you provide to others?

The results demonstrate an overall positive impact of clinical supervision on staff self-efficacy, competency, and perceived influence on client outcomes.

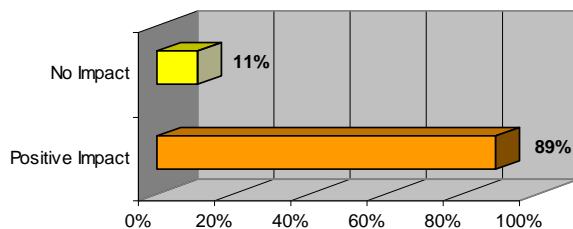
The Clinical Supervision Initiative Measured:

Staff Perception: Staff finds clinical supervision increases their ability to care for others and helps them feel confident and competent in the care they provide.

Quality of Documentation: The process increases compliance with and maintenance of quality and documentation standards.

Client Outcomes and Action Plan for Further Improvement: Client outcomes, reflecting both progress and barriers in areas such as homelessness, use of acute care, employment and individual goal attainment, could not be directly linked to clinical supervision.

Staff Perception



QUALITY DOCUMENTATION

Record keeping is a critical part of clinical care. The clinical record is included in clinical supervision at SMHA to:

- ✓ Ensure applicable milestones, including risk assessments, are captured in documentation, and
- ✓ Increase SMHA compliance with its documentation standards.

Client charts are brought into the supervision session to ensure high quality documentation. Chart reviews are conducted to identify and explore critical elements that document client recovery and positive client outcomes. Clients' progress toward goals, use of community resources, involvement of family and natural supports, and identification of developing strengths, assets and abilities, are examples of elements reviewed. From June to December 2007, the completeness of client reassessments (a quarterly review of client's progress in their recovery) improved from **68% to 94%**.



NEXT STEPS

- ✘ Survey clients on staff skills, attributes and competencies they find effective/helpful to them in their recovery.
- ✘ Analyze results of the DMHAS 2008 Client Satisfaction Survey and determine areas, particularly around recovery, that may enhance the Clinical Supervision process.
- ✘ Develop a group of seasoned clinicians to enhance and refine the structure and process of Clinical Supervision.
- ✘ Orient new staff to the Clinical Supervision process and resurvey staff for enhancements to the current process.