

## Lancaster, Liverpool and Manchester Universities Doctorate Programmes in Clinical Psychology

### How the Programmes Manage Serious Concerns with Supervision on Placement

This document describes the North West Doctorate in Clinical Psychology programmes' policy on dealing with serious concerns about the clinical supervision of trainees on placement. The majority of placements offered are of extremely high quality. The three programmes are enormously grateful for the input to training provided by supervisors and for the high quality of their work. However, on rare occasions concerns about the supervisory and/or clinical competence of supervisors are raised. This policy aims to deal with such situations in a way that is transparent to and supportive of supervisors as well as those raising the concerns. This should mean that where real difficulties do exist these can be identified and appropriate action taken in order to remedy the situation.

The focus of this document is to indicate how the programmes manage serious concerns raised regarding supervision, placement organisation and supervisor competence. It does not address concerns about problematic trainee performance and how this is managed. Responding to concerns about the competence and/or conduct of trainees is addressed comprehensively elsewhere in the three programmes' handbooks and other documentation. It is important to state, however, that any concerns raised about supervisors are taken in the wider context of the relationship between the trainee and the supervisor and other relevant issues. All three programmes recognise and do investigate the potential role of trainees in contributing to any difficulties which arise.

This policy is written to be consistent with guidance provided in the following documents:-

- Health and Care Professions Council (2008). *Standards of Conduct, Performance and Ethics*. London: Health and Care Professions Council
- Health and Care Professions Council (2009). *Standards of Proficiency for Practitioner Psychologists*. London: Health and Care Professions Council
- British Psychological Society (BPS) (2008). *Generic Professional Practice Guidelines (2<sup>nd</sup> edition)*. Leicester: British Psychological Society.
- British Psychological Society (2007). *Committee on Training in Clinical Psychology: Criteria for the accreditation of postgraduate training programmes in clinical psychology: Appendix 4: Guidelines on Clinical Supervision*. Leicester: British Psychological Society.
- Division of Clinical Psychology (1995) *Professional Practice Guidelines*. Leicester: British Psychological Society.
- British Psychological Society (2005). *Code of Conduct, Ethical Principles & Guidelines*. Leicester: British Psychological Society.

### **Dealing with Minor Concerns**

Trainees and supervisors are both encouraged to discuss minor concerns as and when they arise, and to seek a mutually acceptable resolution without involving the training Programme in the first instance. However, if this does not lead to a resolution a more formal approach will need to be invoked. The formal mechanism for managing any concern on placement is the Mid-Placement Review (MPR). Most issues which emerge during this visit can be dealt with easily, usually by direct discussion and negotiation between the programme tutor<sup>1</sup>, the supervisor and the trainee.

The MPR process usually requires the programme tutor to meet on their own firstly with the trainee and then the supervisor. This is followed by a meeting involving all three parties. This format allows both trainees and supervisors to raise concerns and for the programme tutor, where appropriate, to address these individually and collectively.

As well as the MPR process, more informal contact between the programme and the supervisor can be very useful. Programme staff routinely speak to trainees to see how placements are progressing, and supervisors are always welcome to contact the programme staff directly if they have any concerns themselves. Given that early intervention is often more effective than waiting for difficulties to become entrenched, the programmes are keen to keep these informal channels of communication as open as possible. Where minor concerns have been raised, it may sometimes be appropriate for one programme to share these with staff on the other two programmes. Where this is the case, the supervisor will be informed about what information will be passed on. This will be on a strictly “need to know” basis only. The rest of this document deals with situations in which serious concerns about supervision are raised.

### **Dealing with Serious Concerns about Supervision**

Occasionally, a problem emerges with supervision that raises serious concern either about the provision or quality of supervision, or the clinical capacity or competence of the supervisor. In such instances programmes have a professional duty of care to trainees, and potentially to service users and the supervisor’s employers, to act on these concerns.

Examples of a serious concern include:

- gross failure to offer time for supervision (e.g. leaving the trainee unsupervised for a protracted period)
- gross deviations from good practice in supervision. Usually this would reflect a combination of failures rather than a single instance, but include; consistently allowing supervision sessions to be interrupted, conducting supervision sessions in an unprofessional manner (e.g. inappropriately personalising sessions or acting in a manner which took advantage of status differences between trainee and supervisor)

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<sup>1</sup> Please note that the role of the “Programme Tutor” will vary across the three programmes – it may be the person who conducts the MPR or the person responsible for the clinical specialty.

- clear evidence that the quality of supervision fell significantly below the standard expected of a qualified psychologist (e.g. offering advice at clear variance with accepted professional practice, clear indications of minimal or absent knowledge of usual practice in the clinical context)
- unethical professional practice (e.g. operating clearly and observably outside sphere of competence, observed unprofessional behaviour in clinical sessions).
- breaches of the HCPC Standards of Conduct, Performance and Ethics; HCPC Standards of Proficiency; BPS Code of Conduct, Ethical principles and guidelines; or DCP Professional Practice Guidelines (e.g. observed clear breaches of confidentiality).
- breaches of standard NHS policies and procedures (e.g. gross failure to follow safeguarding procedures correctly)
- serious doubts about the clinical competence of the supervisor (e.g. where practice is at clear variance with accepted professional practice).

## Outline of Procedure

### Stage One

The programme tutor will carry out a more detailed evaluation of the complaint. This is likely to include:-

- interviewing the trainee
- interviewing the supervisor
- gathering information from other programme staff
- gathering information from staff from the other North West programmes

Usually, a senior member of the programme team will also meet with the trainee and the programme tutor to consider the issues being raised. The purpose of this initial inquiry is to clarify whether there are appropriate grounds for significant concern. At this stage it may be possible for action to be taken which could resolve the situation to the satisfaction of all parties. Indeed, programme staff would do their best to find a way to achieve this wherever possible. If, once this initial inquiry has been carried out, it is deemed necessary to convene a serious concerns meeting, a decision will be taken regarding whether to suspend the placement.

The outcome of Stage One of this process will therefore either be:-

1. There are deemed to be no substantial grounds for concern (or such action is taken whereby there are no grounds for concern) and that no further action is warranted or necessary.  
*Or*
2. Following investigation it is felt that, whilst problems may exist, they do not amount to 'serious concerns'. In this case, corrective action plans will be agreed, and monitored by the programme tutor. Such matters might include, for example, operational issues relating to the delivery of supervision. Should identified problems remain, this may lead to moving on to stage 3.  
*Or*
3. The need for a "serious concerns" meeting is identified. This will be convened and attended by a senior member of the programme team, the programme tutor, the supervisor and the supervisor's line manager. Where concerns are deemed to be very serious, at this stage the programme will also notify the relevant Head of Psychology services, who may wish to become directly involved.

Trainees sometimes request that such discussions occur only *after* they have left the placement because they worry that their feedback will influence a supervisor's evaluation. While being sensitive to such requests, the programme tutor will decide whether the matter can wait to be raised or whether it warrants immediate attention. If the concerns are judged to be serious, the programme staff will override the trainee's anxieties and take up the issue directly and immediately. Under certain circumstances, the decision may be made to remove the trainee from the placement rather than allow it to continue. The programme tutor will ensure that the trainee is kept

appropriately informed about what is happening and that safeguards are put in place to ensure that the trainee is fully supported during this process.

Whatever the outcome of stage 1, the senior member of programme staff will produce a written report to be made available to the tutor, the supervisor and the trainee. A copy of this report will also be sent to the Clinical Directors of the other two North West programmes to keep them informed.

## **Stage Two**

The programme tutor will convene a serious concerns meeting as soon as possible. This will be attended by a senior member of the programme team, the programme tutor, the supervisor and the supervisor's line manager. The purpose of this meeting will be to discuss and clarify the concerns and to agree a way forward for the placement and the supervisory relationship.

Outcomes from this meeting will vary, although in each case it is anticipated that any plans will be developed and monitored collaboratively between the programme, the supervisor, and the supervisor's line manager. Outcomes will include:-

1. Support for the supervisor may be offered (i.e., encouraging them to participate in supervisor training, to seek supervision on their supervision, to undertake relevant CPD activities).
2. The meeting may agree that the placement was problematic. An action plan may be agreed, which would probably include arrangements for joint monitoring of future placements and, if appropriate, working with the supervisor to help them address any concerns.
3. The concerns raised about supervision may raise significant questions about a supervisor's professional and clinical competence and/or conduct. In such cases, the programme and the supervisor's line manager will discuss an appropriate action plan. This may include a decision not use the supervisor again. Where appropriate, discussion will take place regarding the conditions to be satisfied for the future before the supervisor would be able to supervise trainees again.
4. Where the concerns are such that the supervisor's practice appears to be significantly at variance with acceptable professional standards (including breaches of any of the HCPC, BPS or DCP standards listed on page one) OR relevant NHS Trust procedures, it would be expected that the supervisor's line manager would investigate this according to their employing Trust's HR procedures.

As with stage 1, the senior member of the programme team will produce a report, summarising the outcome and any agreed action plan, for circulation to the supervisor, the supervisor's line manager, and the programme tutor. A copy of the report will also be sent to the Clinical Directors of the other two programmes. Such reports will be kept by the programmes for a period of five years.

It is important to note that the programme staff have a duty of care in relation to trainees, supervisors and service users. They will, therefore, act on this when appropriate according to the procedures described in this document. The programme staff are not the supervisor's employer or line manager and their duty of care is discharged once the programme's concerns have been brought to the attention of the employer via the supervisor's line manager. Programme staff do, however, have a remaining duty to ensure that they make appropriate arrangements to end the placement if its continuation is not feasible, or to oversee the remainder of the placement following the serious concerns meeting if the outcome is for the trainee to remain within that service.

Whenever a serious concerns meeting is held, the Clinical Directors of the other two North West programmes will be informed. This will be done within the boundaries of confidentiality stated elsewhere within this document. Given that the three North West programmes work closely together to undertake placement allocation and share the same placement patch across the North West, any investigations described above would as such be carried out on behalf of all three programmes.

None of the above steps will be taken on the basis of trivial or unsubstantiated complaints. It is in the interest of programmes as well as supervisors that this is so, and there should be sufficient checks and balances built into the system to ensure that this does not happen. A powerful reassurance should be the fact that should a programme take inappropriate and ill-founded action against a supervisor, it would find it hard to get supervisors to agree to supervise for them – and rightly so. Additionally, where an accusation by a trainee is deemed to be malicious, this will be conveyed to the trainee's line manager, who will need to consider invoking the trainee's own disciplinary procedures.

All three programmes recognise that supervisors often work in services in which significant demands are placed upon their time and where such pressure may in some circumstances affect the quality of supervision offered. The programmes are keen to engage constructively with supervisors in conversations about such issues and to provide support in a number of different ways to help them to continue to supervise trainees. In some circumstances this might include raising concerns with the Strategic Health Authority/NHS North West. The aim here is to ensure that where serious concerns about competence or conduct are raised these are responded to in a clear, safe and transparent way. The programmes hope that this policy does not raise anxiety - it is not intended to alarm but to inform.

*Please note that this document is based on a policy devised by the North London Doctorate Programmes in Clinical Psychology at UCL, UEL and the Royal Holloway – with thanks.*