

Allied Health Assistant Clinical Supervision- Fulfilling the entitlements

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Background

Clinical Supervision can be defined as a formal meeting between supervisor and supervisee, group or peer. With the intention to improve job satisfaction, performance enhancement, professional and personal development.

In 2016 an Allied Health Assistant (AHA) scope survey at Monash Health indicated only 83% of respondents were receiving Clinical Supervision (CS). These results raised awareness that the current entitlements were not being fulfilled and the need for monitoring the frequency and satisfaction of AHA supervision was indicated.

Method

In 2017 AHA's working across Monash Health formed a working party to run a six month trial of clinical supervision types: Individual (Higher Grade AHA or Allied Health Professional (AHP) lead), Group with higher Grade AHA as lead, Group with AHP lead, and Peer. A satisfaction survey was designed and completed pre and post-trial by AHAs, AHPs, and Managers (See Table 1). Interviews and focus groups were audiotaped to gain perspectives. To analyse the multiple perspectives a thematic analysis of the findings was performed, based upon NSW Health Clinical Orientation Framework (See Figure 1).

Results

The trial was completed by AHAs and AHPs across the network. This survey was completed 42:33 AHAs, 35:20 AHPs and 11:9 Managers (pre:post). It was identified there was a 9% increase in AHA satisfaction, 30% increase in AHP satisfaction and 34% increase in Manager satisfaction with the current CS arrangements (See Table 1).

	AHA		AHP		Managers	
	Pre trial	Post trial	Pre trial	Post trial	Pre trial	Post trial
Respondents	42	33	35	20	11	9
Awareness of Clinical Supervision Procedures	76%	94%	76%	100%	90%	100%
Completed Allied Health Clinical Supervision Staff Training	18%	73%	32%	95%	44%	
Receiving/Delivering documented Clinical Supervision frequency	73%	100% receiving monthly clinical supervision between 30-60min	60% delivering monthly clinical supervision between 30-60min	95% delivering monthly bimonthly clinical supervision for 30-60min		100% of AHAs receiving formal monthly supervision
Current clinical supervision agreement satisfaction	80.5% satisfied - very satisfied	85% satisfied - very satisfied	50% satisfied	95% satisfied - very satisfied	N/A	89%
Comfortable to raise issues of concern regarding clinical supervision	62%	85%	71%	100%	55%	89%
Documented clinical supervision	68%	97%	74%	95%	N/A	N/A
Perceived competence to deliver clinical supervision to AHA's	N/A	N/A	70% of supervisors felt competent	95%	N/A	N/A

1. Monash Health

Significant findings

AHA CS is an entitlement that must be fulfilled to continue addressing concerns and career development / enhancement.

Conclusion

Overall the trial improved awareness of CS requirements. Staff satisfaction with CS frequency also increased. Feedback received from AHA's involved was that there was an increase in addressing concerns and improving performance enhancement / development. Ongoing monitoring by the AHA working party is required to ensure the entitlements to CS are fulfilled.

References:

HETI (2015). NSW Health Clinical Supervision Framework. <http://intranet.heti.nsw.gov.au/Global/allied-health/NSW%20Health%20Clinical%20Supervision%20Framework.pdf> viewed on 01/02/2019.

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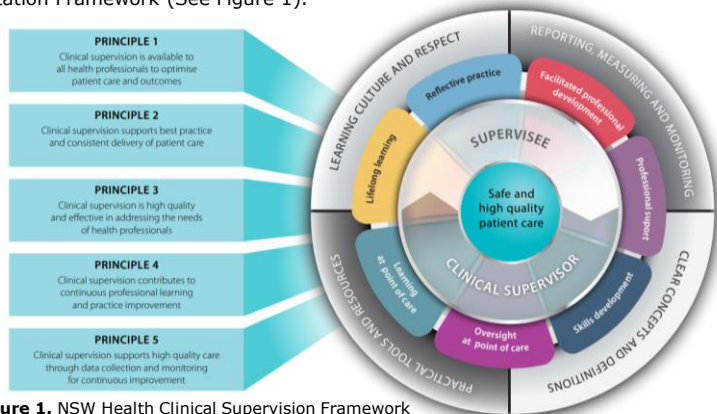


Figure 1. NSW Health Clinical Supervision Framework

Table 1. Summary of online survey results