

Finally, it is recognised that supervisees will need to prepare for each supervision session. As a guideline this preparation time should be typically 30 – 60 minutes prior to each reflective supervision session.

FREQUENCY

All registrants in Northern Ireland should have a minimum of two opportunities per year for reflective supervision, which will be individual or group in format. The nurse or midwife supervisee may decide to choose a combination of group and individual supervision - it is entirely the choice of individuals.

The reflective supervision session can be attributed as a *professional reflective discussion* that can be counted as part of revalidation processes.

Frequency of Reflective Supervision based on Escalation of Risk in Practice

Reflective supervision should enable registrants to reflect on personal, professional and service provision topics to support improved safety, quality and person-centred practice for health and care services. Whilst standards of professional practice are supported through the supervision process, reflective supervision is primarily focused on support for learning for the individual and not organisational performance. Nurses and midwives work in challenging environments and in circumstances that might, on occasion, require an increased level of support for practitioners. This may mean that the mode and/or frequency of reflective supervision will change depending on circumstances (**Figure 4**).

Each supervisee should consider a range of factors that might trigger the need for the review of frequency and type of reflective supervision: They might include:

- ▶ Risks that could compromise the quality of patient/client services.
- ▶ Risks that could compromise the patient/client experience.
- ▶ Risk of negative impact to the staff experience.
- ▶ Reported personal stress.

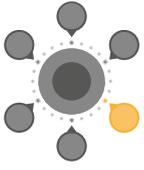
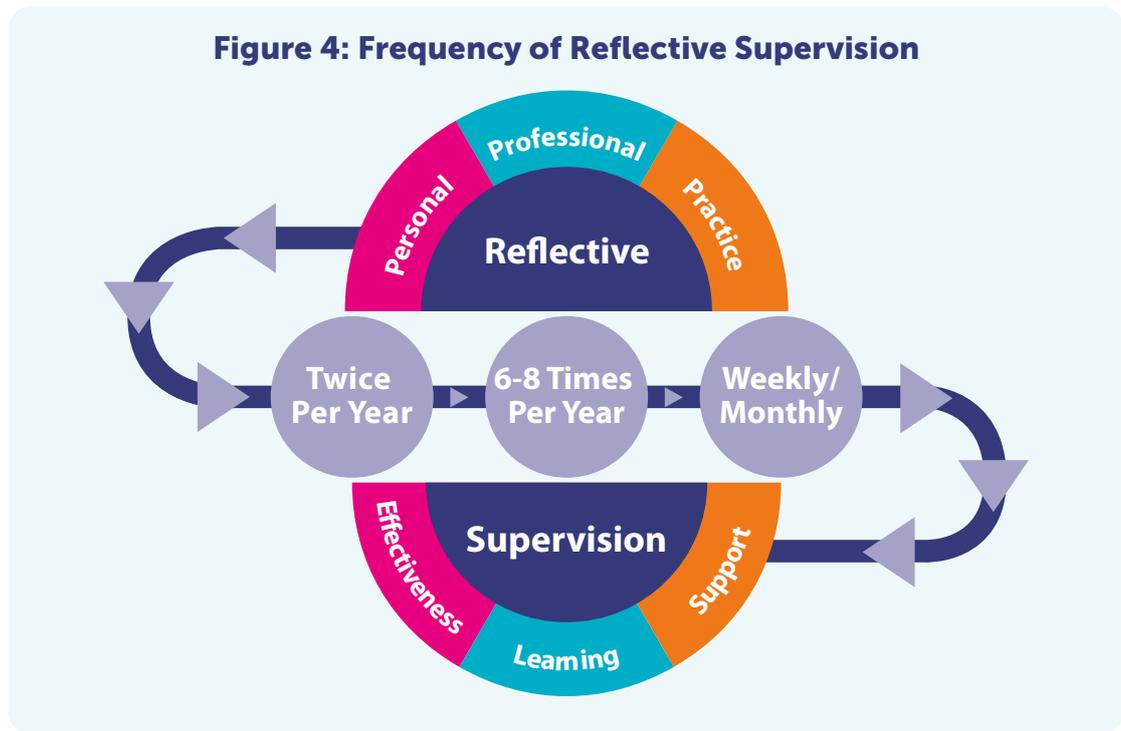


Figure 4: Frequency of Reflective Supervision



A range of tools will be provided and updated on a supervision microsite housed at www.nipec.hscni.net to help nurses and midwives think about the support they might need. Professional judgment will be required in terms of the type accessed. These decisions may be taken in discussion with and guided by the individual's supervisor or line manager. Other frameworks exist that might further help reflection on practice such as the UK Chief Nursing Officer's *Enabling Professionalism*⁸ Framework.

8 UK Chief Nursing Officers. (2017). *Enabling Professionalism*. Available for download at: www.nmc.org.uk/globalassets/sitedocuments/other-publications/enabling-professionalism.pdf