BUILDING AN EFFECTIVE AND SUPPORTIVE SUPERVISION FOR QUALITY IMPROVEMENT

Sedef YENICE

Istanbul Bilim University and
Group Florence Nightingale Hospitals, Istanbul, Turkey

sedefyenice@gmail.com
sedef.yenice@florence.com.tr
Learning Objectives

• Define supportive supervision
• Compare of traditional and supportive supervision
• Supportive supervision as a process
• Framework for Supervision towards Quality Improvement
• Key competencies for supervisors
• Describe different supervisory roles
What is Supervision?

- A "process". It is not a one-time event, but is connected series of events over a period of time.

- Involves **guiding**, **helping** and **encouraging** staff to improve their performance over the long term so that they meet the defined standards of their organization.

- Helps staff to **meet the defined standards of their organization**.

- Service delivery standards or management standards define how and when work should be done.
Audience Response

Is supervision conducted frequently or regularly in your work environment and your organization?

1. Yes
2. No
Is supervision findings documented and feedback provided to staff of facilities that had been supervised?

1. Yes
2. No
Audience Response

Is the staff of your supervised facility involved in deciding follow-up actions?

1. Yes
2. No
Transformation of Supervision

Views about effective supervision have changed over the years.

• Traditionally, supervision was seen as an inspection of what a supervisee was doing and it was carried out by a «designated supervisor».

• In traditional supervision, a supervisor came in and went out quickly, and talked at the staff being supervised rather than talked with them.

• With this approach, supervision focused on identifying what had not been accomplished.
What is Supportive Supervision?

• A facilitative approach to supervision that promotes mentorship, joint problem-solving and communication between supervisors and supervisees.
• It is carried out in as respectful and non-authoritarian way with a focus on using supervision as an opportunity to improve knowledge and skills of staff.
• Depends upon regular follow-up with staff to ensure new tasks are being implemented correctly.
• Helping to make things work, rather than checking to see what is wrong.

Process and Skills
What are the key differences between traditional and supportive supervision?
# Comparison of Traditional and Supportive Supervision

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<td>Who does the supervision?</td>
<td>External supervisors designated by the management structure</td>
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<td>• Staff from other facilities</td>
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<td>• Staff through self-assessment</td>
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<td>• Organizational Committees</td>
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<td>When does supervision happen?</td>
<td>During periodic visits by external supervisors</td>
<td>• Continously: during routine work</td>
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<td>• During team meetings</td>
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<td>• Confirmation visits by external supervisor</td>
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<td>How do supervisors prepare?</td>
<td>Little or no preparation</td>
<td>• Supervisors review previous supervisory reports</td>
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<td>• Supervisors review reported achievements</td>
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<td>• Supervisors decide before the supervision visit on what they need to focus on</td>
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## Comparison of Traditional and Supportive Supervision

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| What happens during supervision? | • Inspection of facility  
• Review of records and supplies  
• Focus on fault finding  
• Little feedback or discussion of supervisor observations  
• Supervisors make most decisions | • Observation of performance and comparison to standards  
• Immediate feedback from supervisor  
• Joint problem solving on possible solutions to performance problems  
• Provision of technical updates and guidance  
• On-the-job training where necessary  
• Use of data to help identify opportunities for improvement  
• Follow-up on the previously identified problems |
| What happens after supervision? | No or irregular follow-up                                                    | • Actions and discussions are recorded  
• Ongoing monitoring of weak areas and improvements  
• Follow-up on prior visits and problems |
Framework for Supervision towards Quality Improvement

Inputs
• Supervisors
• Supervisees
• Drivers
• Guidelines
• SOP
• Instrument/Checklists
• Stationery
• Middleware
• Quality Indicators
• Patient/Client Complains

Process
• Planning/Scheduling
• Communications of schedule
• Budgeting
• Preparations
• Supervision visit:
  • Direct observation of lab practice
  • Interviews
  • Inspection of facility
  • Feedback
  • Problem-solving
  • Coaching (on the job training)
  • Joint problem solving
• Reporting
• Follow-up

Outcomes
• Direct Outcomes
  • Improved lab staff skills
  • Improved compliance with clinical and management standards
  • Improved efficiency of lab service
  • Improved staff motivation/satisfaction

• Indirect outcomes
  • Improved patient safety
  • Improved patient and physician and healthcare team satisfaction
  • Increased utilization of lab services
Types of Supportive Supervision

Integrated

- Periodic assessment of all the activities for which a particular facility is responsible.
- Every activity should have been supervised at least once in the course of one year.
- Most effectively carried out by multi-disciplinary teams which have expertise in lab practice, quality management, administration and biosafety.
- Enables the different supervisors to develop a broad understanding of all the different programs and offer integrated guidance.
- The problems found can not be dealt with during the current visit and reported back to seek the necessary experts or materials and to provide technical support.

Technical

- Specific programs may require program-specific supervision, such as IVF, Tissue Typing, Genetics, Stem-cell research, Blood Bank or Molecular testing labs.
- A need for program-specific technical support may be identified during an integrated supportive supervision visit to a facility.
- Can provide needed specialist support.

Emergency

- Supervisors may be required to provide support in the case of emergencies such as an outbreak or disaster.
How To Conduct a Supportive Supervision Process

**Setting up a supportive supervision system**
- Training a core set of supervisors
- Creating checklists and recording forms
- Ensuring appropriate resources are available

**Planning regular supportive supervision visits**
- Where: using data to decide priority supervision sites
- When: Schedule supervision visits using a work plan
- What subjects to train: identify training needs and skills that need updating

**Conducting supportive supervision visits**
- Observation
- Use of data
- Problem solving
- On-the-job training
- Recording observations and feedback

**Follow-up activities**
- Follow-up on agreed actions by supervisors and supervised staff
- Regular data analysis
- Feedback to all stakeholders
The three main Rs for an effective supportive supervision system are:

**Right Supervisors**
- A core set of supervisors, well trained on supportive supervision techniques and with updated information and skills on a particular issue.

**Right Tools**
- Availability of training materials and job aids to update skills of health workers during supervision visits, and checklists and forms for recording recommendations and following up.

**Right Resources**
- Sufficient tools and instruments, time allocated for supervision and follow-up.
Setting up a supportive supervision system

Right Supervisors

- Supervisors are themselves well informed and trained. The initial step will be to provide refresher training for the core supervisors.
- To identify the training needs of supervisors, start by asking the following questions. E.g.:
- Have there been any major changes in the POCT system which require training – introduction of new instrument, new policies or reporting procedures).
- Do the supervisors require training on supportive supervision techniques and participatory approaches – problem identification and solving, coaching, on-site training, etc.
- Are there areas that can be strengthened by supportive supervision and will therefore require supervisor training? – e.g. infection control procedures need to be enhanced to prevent the transmission of blood-born pathogens and therefore supervisor nurse of infection control needs training to train the nursing staff at the wards.
Setting up a supportive supervision system

It is important to have the right tools available to assist supervisors and to standardize the supervision system. These tools include:

1) Supervisory checklist – Three S’s for a good quality checklist are:
   - **Short** – should include only priority areas
   - **Specific** – with details on what exactly needs to be observed
   - **Simple** – Additional observations or comments should be easy to complete and flexible to record

2) Learning materials and job aids to be used by supervisors during supervision visits
Preparing a Supervisory checklist

• You are a supervisor about to visit a facility/department. You have little time available as this will be one of the many places that you have to visit.
• Your challenge is to create a checklist not more than one page long (max. 15-20 questions).
• Give priority to issues on which you can provide on-the-job support.

Sample Collection
- All materials for sample collection brought to patient side.
- Patient identified correctly utilizing two identifiers.
- Wears gloves and practices hand hygiene before putting gloves on and after removal.
- Collection site prepared correctly.
- Fingerstick performed correctly.

Quality Control
- Understands the Hemocue "self test".
- Understands that two levels of liquid QC is performed daily.
- Dates QC reagent properly/checks expiration dates.
- Mixes QC bottles properly.

Test Procedure using cuvettes
- Operator is aware of expiration date of cuvettes in use.
- Cuvette bottle is dated if reagents are not individually wrapped (90 days).
- Cuvette handled correctly.
- Cuvette filled in one continuous motion and the outside wiped off properly.
- Operator ID and patient CSN entered correctly.
- Cuvette and other contaminated items disposed of correctly.

Result Reporting
- Policy and procedure for reporting results followed correctly.
- Operator is aware of action to be taken in the case of critical results.
- Operator aware of action to be taken in the case of ***<, or >.
- Operator demonstrates ability to recall stored results.
- Operator demonstrates procedure to transmit results.

Care of Components
- Analyzer rechargeable battery, recharged correctly.
- Decontamination of analyzer performed correctly.

Trainee: ___________________________ Date: ___________________________
Trainer: ___________________________ Date: ___________________________
### Setting up a supportive supervision system

#### POCT Supervisory Checklist

#### HASTA BAŞI TESTLERİ (HBT – “POCT”) DENETİM FORMU

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| Test laboratuvar sorumlu uzmanın |
| tarihinden tarihi ve tarihi için onayları: |

| Gereklili tahlilde, yazılı test |
| prosedüründe belirlendiği şekilde izlene |
| ve doğrulama testleri yapılır. |

| Politika-gereğin bu testi yapmalık testi gerekli. |
| O: TESTİ YAPILI |
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Bu testin uygulanmasının üreticinin teşvkiyle uygulanır.

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| Talimat laboratuvar politikalarına göre |
| kullanıldığını belirtmektedir: |

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Preparing learning materials and job aids

It is important to have standard materials available that:
- Are specific to the skills that need to be improved
- Can be used to prepare for training
- Supervisors can refer to during training sessions
- Workers can use to practice and reference

Different training methods that a supervisor could use to help on-site training are:
- Participatory exercises
- Group discussion
- Small group work
- Case study
- Practical exercises
- Demonstrations/presentations
- Role playing Q&A sessions

What is a Job Aid? – Quick and easy reference useful as they target specific tasks or skills – posters, cards, manuals, etc.

- Checklist of things to perform the job
- One-page sheet with pictures showing how to do
- Poster on the appropriate area
- Poster showing methods
- Poster with standard case definitions, pictures of microscopic views, etc.
- Important telephone numbers
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<td>Preparing learning materials and job aids</td>
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### Employee Orientation/ Competency Assessment Checklist

#### Setting up a supportive supervision system

- Preparing learning materials and job aids
- Employee Orientation/ Competency Assessment

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- Employee Orientation/ Competency Assessment
- Setting up a supportive supervision system

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**Employee Orientation/ Competency Assessment Checklist**

<table>
<thead>
<tr>
<th>Element (EN)</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.2.1</td>
<td>Orientation</td>
</tr>
</tbody>
</table>
Setting up a supportive supervision system

Preparing learning materials and job aids

• Employee Orientation/Competency Assessment Checklist

Hemoccult Sensa Slide Training and Competency Record

Skills Training and Evaluation

1. Describes purpose of test
   Met □ Unmet □

2. Demonstrates compliance with Standard Precautions; uses gloves
   Met □ Unmet □

3. Describes proper sample collection and application procedure
   Met □ Unmet □

4. Waits 3.5 minutes before applying developer directly over each smear
   Met □ Unmet □

5. Read test results within 60 seconds. Any trace of blue on or at the edges of the smear is positive for occult blood
   Met □ Unmet □

6. Develop the "On-Slide Performance Monitor" by applying one drop of developer between the positive and the negative Performance Monitor areas on the back of the slide
   Met □ Unmet □

7. Reads the slide within 10 seconds
   Met □ Unmet □

8. Interprets On-Slide Performance Monitor correctly (should be blue in the (+) area, no blue in the (-) area)
   Met □ Unmet □

9. Takes appropriate action based on results of the "On-Slide Performance Monitor"
   Met □ Unmet □

10. If performance monitor results are as expected, records result in appropriate log or record
    Met □ Unmet □

11. If Performance Monitor results are not as expected, takes appropriate action (repeats using new card, or card from new box, and/or new developer; knows whom to notify)
    Met □ Unmet □

Learning Assessment/Test

1. After you apply the specimen to the slide, how long should you wait to apply the developer?
   a) 30 seconds □
   b) 1-2 minutes □
   c) 3-5 minutes □
   d) at least 10 minutes □

2. After applying the Hemoccult developer to the specimen, the result should be read within:
   a) 5 minutes □
   b) 2 minutes □
   c) 60 seconds □
   d) 30 seconds □

3. What would you do "first" if you developed the on-slide monitor and the results were either both positive or both negative?
   a) Report the patient result □
   b) Check expiration date on slide and developer □
   c) Retest using a new slide □
   d) Throw out the box of slides □

4. After applying the hemoccult developer to the on slide performance monitor, the result should be read within:
   a) 10 seconds □
   b) 30 seconds □
   c) 2 minutes □
   d) 5 minutes □

5. Hemoccult Sensa slides and developer are stored at:
   a) Refrigerate or freeze □
   b) Room temperature □
   c) RT with volatile reagents □

Score:
(Passing = 80% or higher)

Individual Information

*Name: ____________________________

*Employee ID#: ____________________

*Care Unit: ________________________

RN  □  LPN  □  PCA  □  Other: _______________________

*Date of Training: ____________

Training Status:
New/Initial □  Recertification □

*Required Fields

The trainer’s signature attests that the trainee has (a) successfully completed the program and scored 80% or better on the quiz, and (b) demonstrated successful skill in performing this procedure.

Trainer Signature ____________________________ Date ____________

1 Retain as part of permanent record
Setting up a supportive supervision system

Preparing learning materials and job aids

• Employee Orientation/Competency Assessment Checklist
Setting up a supportive supervision system

When setting up a supportive supervision system, you need to ensure that adequate resources are available.

Right Resources
### Planning regular supportive supervision visits

#### Where
- The most common criteria used for selecting priority areas include:
  - Highest number of tests
  - Poor reports from previous supervision visits
  - Areas with few or no visits in the past
  - Frequent stock problems (overstock or stock-outs)
  - New staff who may need monitoring/training on practices
  - Problems identified by health staff, clients or the administration
  - High risk departments
  - Poor performance

#### When
- Need to prepare a supportive supervision schedule
- Annual work plan
- The frequency of supervisory visits will vary with the situation
- Problem solving and motivation of the staff will demand frequent supervision if they are to result in improved performance
- New facilities or major changes in existing health or lab services, e.g. new staff, new responsibilities will require frequent visits.
- When planning the schedule, ensure that adequate time is available

#### What
- A review of previous supervision reports, checklists or data analysis can assist in identifying which topics to cover during the visits.
- Always be prepared to use data – summary data, monthly reports, QC reports, complain, sentinel event reports, etc. as reference material.
- Prepare a agenda for the visit in advance, some training needs may become evident during the visit or during the discussions with the staff.
### Conducting supportive supervision visits

#### Collecting Information
- Observing the facility environment and the workers performing
- Listening to workers
- Reviewing the records
- Using a checklist
- Talking patients
- Reviewing recommendations of past visits
- Conducting a rapid survey

#### Problem-solving and feedback
- Problem-solving with staff
  - Describe the problem and its impact
  - Discuss the causes of the problem with staff
  - Implement solutions and monitor regularly
- Feedback to the staff concerned

#### On-the-job training
- Six main steps when teaching a skill
  - Explaining the skill or activity to be learned
  - Demonstrating the skill or activity using a model or role-play
  - Participants practising the demonstrated skill or activity
  - Reviewing the practice session and giving constructive feedback
  - Practising the skill or activity with clients under a trainer’s guidance
  - Evaluating the participant’s ability to perform the skill according to the standardized procedure, if possible as outlined in the competency-based checklist

#### Recording of results of supervision
- Recording the date of the visit, main observations, training given and agreed follow-up actions
- Preparing a supervision report and sharing the findings with the supervisees – either a copy or written/verbal summary, a bulletin, or organizing a seminar to discuss the results of the supervisory visits

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**IFCC EMD - Committee on Clinical Laboratory Management (C-CLM)**
Conducting supportive supervision visits

A simple format of a supportive supervision record-book

<table>
<thead>
<tr>
<th>Date of Visit</th>
<th>Basic Tools</th>
<th>Stock Recording System</th>
<th>Training Guidance Provided on</th>
<th>Agreed Follow-up Action</th>
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<tr>
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<td>Session Plan</td>
<td>Work Plan</td>
<td>Drop-out Tracking</td>
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Basic Tools:
- Session Plan
- Work Plan
- Drop-out Tracking
- Stock Recording System

Training Guidance:
- Provided on

Agreed Follow-up Action:
- Action
What to do after a supervision visit

- Follow-up may include the following:
- Acting on issues you agreed to work on
- Involving workers in the planning process and working with them to develop checklists, job aids, monitoring tools, etc.
- Discussing equipment supply and delivery problems with higher levels
- Reviewing monthly reports and establishing regular communication with supervised staff to see if recommendations are being implemented
- Identifying career growth or leadership opportunities for the personal development of supervised staff
Follow-up activities

Conducting follow-up visits

- Ensuring problems identified at a previous visit do not persist
- Reinforcing with the workers that issues found during the last visit are still important
- Supporting the worker. If the problem has not been fixed, why not?
- Checking if past on-the-spot training has been effective
- Ensuring that the performance of the worker is being monitored and improved
- Allows the supervisor to have consistent messages
- Ensures the supervisor to confirm the visit is relevant based on previous visits and findings
- Ensures that even if different supervisors visit a work area, relevant supervision can still be provided.
Need Support?
Skills - Heart of Supportive Supervision

- Set Goals
- Listen
- Cultivate Accountability

Supportive Supervision

- Leadership and Management Course, Participant Handbook Session 2.3: Skills for Supportive Supervision, ZHRC and CDC.
Different Roles of Supervisor

**Role Model**
- Supervisors provide guidance to employees on how to conduct themselves in the workplace
- Model performance standards
- Provide guidance for acceptable and unacceptable behaviour
- Walk the talk

**Teacher**
- Provide information
- Build employee skills
- Effectively deliver needed information, so employees can understand and learn
- Develop employee potential to learn

**Motivator**
- Encourage others to achieve desired results
- Create enthusiasm and commitment in others
- Aim to understand what motivates each individual

**Mentor**
- Serve as a wise and trusted guide and advisor
- Help staff achieve what they never thought or believed they could
- In mentor role, the supervisor does not direct the employee’s work
- Mentoring relationships are similar to coaching
Supervisor Key Competencies

Gain Acceptance as a Supervisor
- Know your staff
  - Advocate
  - Listen
  - Communicate openly
  - Be consistent
  - Respect
  - Problem solve

Develop Employee Workplans
- Meet with each employee individually
- Jointly develop performance objectives for a specified time period (3, 6, 12 months)
- Review workplans regularly, change as needed
- Supervisor and employee should agree on:
  - Major areas of responsibility
  - Performance standards

One-on-One Meetings
- Regularly scheduled
  - Weekly or every 2 weeks, rarely missed!
- Focus on the staff member
- Discuss progress, challenges, successes
- Problem solve together as needed
- Provide positive feedback and corrective or constructive feedback as needed
- Aim for 30-60 minutes, in private
- Notes can help guide future follow-up

Managing Conflict
- Conflict is inevitable
- Conflict is not always negative
- It can help teams grow, consider new ideas, and produce good solutions
- Address and prevent destructive fighting and politics
- Promote and model productive, healthy conflict

Counselling Troubled Staff
- Staff may need support, flexibility or assistance when dealing with a personal difficulty
- Personal difficulties can impact work performance
- Support staff to resolve personal difficulties
- Respect privacy, confidentiality
- Offer flexible schedule, re-assess workplani allow leave
- Adhere to appropriate policies
- Refer to an outside source for assistance, if possible

Leadership and Management Course, Participant Handbook Session 2.3: Skills for Supportive Supervision, ZHRC and CDC.
Supervisor Key Competencies

**Maintain High Performance**
- Motivate your staff to achieve their best work
- Formal opportunity to review overall performance
- Meet with employees individually
- Review entire workplan, assess performance
- Provide feedback, set goals
- Develop action plan, professional development plan
- Regularly scheduled basis (6-12 months)
- Incorporate employee’s comments in documentation

**Conduct Performance Reviews**
- Approach performance issues constructively
- Give feedback
- Work collaboratively to problem-solve
- Look for underlying causes, try to address them
- If necessary, pursue disciplinary action of termination

**Dealing with Performance Problems**
- Finding time to supervise well is challenging
- Plan ahead
- Prioritize
- Ask for advice/Support
- Búsl in Free Time
- Delegate
- Minimize interruptions

**Time Management**
- Finding time to supervise well is challenging
- Plan ahead
- Prioritize
- Ask for advice/Support
- Búsl in Free Time
- Delegate
- Minimize interruptions
Top 10 Ways to Motivate Staff

1. Meet and Listen
2. Provide Specific and Frequent Feedback
3. Keep Staff Informed
4. Recognize, Reward, and Promote High Performance
5. Involve Staff in Decision Making
6. Encourage to Learn New Skills and Develop
7. Create a Partnership with each Employee
8. No Blame, No Shame
   Be Open and Built Trust
9. Personally Thank
10. Celebrate Successes

Every person under your supervision is different. They're all different. They're identical in most ways, but not in all ways. You have to study and analyze every individual under your supervision and try to work with them in a way that will be most productive.

— John Wooden —
Conclusion

• Supervisors carry great influence over their staff.
• Supportive supervision involves processes and skills.
• Supportive supervision requires staff motivation, quality, successful implementation of activities and projects, problem solving and quality improvement.
• Supervisors can serve as role models, teachers, motivators, and mentors to their staff.
  Supportive supervision;
• provides the staff having opportunities for increased job satisfaction and see their work as part of a larger picture,
• Encouragement and support to the organization in continuously improving the quality of services,
• Help sites translate institutional goals into services that clients want and need,
• Provides management with information about the quality of services being implemented and help identify constrains to improving the quality
Useful Links and Further Readings

- WHO/IVB/08.04, 2008

- MAQ PAPER NO.4, 2002
- Guidelines for Implementing Supportive Supervision: A step-by-step guide with tools to support immunization; Children Vaccination Program, PATH; Seattle; 2003
- Supervising Healthcare Services (Improving the Performance of People); JHPIEGO; 2004
- Training for mid-level managers (MLM) Module 4: Supportive Supervision; WHO Department of Immunization, Vaccines and Biologicals, 2008
- Supervising Healthcare Services (Improving the Performance of People); JHPIEGO; 2004
The world will always need human brilliance, human ingenuity and human skills.

Brad Keywell  
*Co-founder and CEO, Uptake*
THANK YOU!