

CLINICAL SUPERVISION PRACTICE STATEMENT

My Commitment

I offer a safe, respectful, and confidential supervisory relationship within a structured clinical supervision framework. This includes work commissioned by organisations, employers, and funded programmes, and may incorporate reflective practice and professional development coaching as part of an integrated process.

My work is:

- led by you, with focus, content, and pace shaped around your priorities
- grounded in psychological safety, active listening, trust, and non-judgement
- reflective and relational, supporting insight, learning, and informed decision-making
- balancing support with appropriate challenge
- focused on sustaining wellbeing, resilience, and effective practice
- independent, while respecting the values, identities, and communities you serve

Confidentiality is maintained at all times, except where there is a safeguarding concern or risk of harm. In these situations, actions are discussed transparently and, wherever possible, addressed in partnership with you.

My practice is grounded in clinical supervision principles, adapted for complex, non-therapy contexts including leadership, advocacy, and community-based roles. Supervision holds responsibility across multiple levels, supporting the practitioner, the people and communities they work with, and the organisational context in which that work takes place.

While supervision supports safe, ethical, and accountable practice, it is not a performance management or line management function. It provides an independent space to reflect, think, and navigate complexity with clarity and integrity.

My Supervision Framework

My supervision practice is relational and reflective, supported by established supervision frameworks that help guide structured reflection, ethical practice, and professional accountability.

My practice is also informed by a Clinical Supervision Competency Framework which outlines the professional standards underpinning my work in more detail.

My work is primarily informed by the Seven-Eyed Model of Supervision, developed by Peter Hawkins and Robin Shohet. This widely used framework explores different aspects of practice, including the work being undertaken, the relationships involved, the emotional impact of supporting others, and the wider organisational and social context.

In supervision, this may include reflection on:

- the people and situations you are supporting
- the relationships involved in the work
- your own responses, reactions, and wellbeing
- ethical considerations and professional boundaries
- the wider systems, organisations, and power dynamics shaping the work

My practice is also informed by the **Three Function Model of Supervision**, developed by Brigid Proctor and Tony Inskipp, this model recognises three key elements within effective supervision:

Restorative — supporting wellbeing and resilience in emotionally demanding work

Formative — reflection, learning, and professional development

Normative — supporting ethical, safe, and accountable practice, including reflection on boundaries, safeguarding responsibilities, and professional decision-making (this is distinct from line management or performance assessment)

Together, these frameworks support a reflective, relational, and trauma-informed approach that recognises the complexity of frontline, leadership, and community-based roles, and the ways identity, power, and social context can shape professional practice.

While I draw on established supervision frameworks, I work in ways that are critically reflective of power, culture, and context, grounded in cultural humility, and responsive to lived experience and diverse ways of knowing.

Who I work with

I work with individuals seeking reflective, relational, and specialist support and supervision, provided externally and independent of line management, across professional, community, and independent roles.

This includes:

- frontline practitioners, specialists, managers, and leaders within mental health, wellbeing, community, and lived-experience services
- people in isolating roles, including sole, autonomous, or highly specialised posts
- practitioners working in high-risk or emotionally demanding contexts such as suicide prevention, crisis response, safeguarding, and trauma-exposed services
- leaders carrying strategic, organisational, or people management responsibility without access to peer-level support
- people embedded within their own communities, navigating dual relationships, blurred boundaries, and conflicts of interest
- practitioners working from lived experience or experts by experience
- individuals managing their own mental health alongside professional responsibility
- those supporting people experiencing inequality, exclusion, discrimination, or targeted hate

Where isolation arises through role, identity, responsibility, or lived experience, I offer a confidential and psychologically safe space to reflect, process, and stay connected to values and practice.

How I can support you

Through clinical supervision, I offer space to:

- reflect on practice, experiences, successes, and challenges
- navigate complex situations, ethical dilemmas, and decision-making
- explore workplace relationships, power, conflict, and communication
- reflect on assumptions, bias and power, and explore how these may influence ethical and inclusive practice
- manage emotional impact, stress, vicarious trauma, and burnout
- strengthen confidence, professional identity, and self-belief
- balance personal challenges alongside professional responsibility
- develop sustainable boundaries and ways of working
- navigate change, transition, and uncertainty
- clarify direction through reflection, planning, and considered next steps

Supervision is shaped around your priorities and pace, offering both support and thoughtful challenge.

What I bring

I bring extensive lived and professional experience of working in emotionally demanding, high responsibility roles across community, mental health, and specialist services.

This includes:

- deep understanding of role isolation and its impact on wellbeing and practice
- significant experience supporting work involving trauma, safeguarding, risk, and moral distress
- a strong track record in suicide prevention, LGBTQ+ mental health, and work with migrants, refugees, and marginalised communities
- experience designing, leading, and managing respected and award-recognised services
- insight into organisational culture, identity-based discrimination, and systemic harm
- strategic and operational leadership experience, including governance, risk, and accountability
- a reputation for compassionate, values-led leadership and psychologically safe practice
- regulated, externally awarded, and professionally accredited qualifications in clinical supervision, coaching, reflective practice, cognitive behavioural therapy (CBT), psychology, advocacy, mindfulness, neurodiversity, neuro-linguistic programming (NLP), and other specialist training.

I maintain my own regular clinical supervision to support reflective practice, accountability, and ongoing professional development.

My approach is integrative, relational, and trauma-informed, recognising both the human experience and the professional responsibility carried within your role.