**Guidance on the Recording of Clinical Supervision and Management Oversight within the Post Adoption Support Service**

This document should be read in conjunction with the KCC recording policy and supervision policy. Where there is a non KCC employee, the expectations set out below should be clearly stated in any written contracts.

KCC recording policy states “Records should be updated as information becomes available or as decisions or actions are taken as soon as practicable or**, at the latest, within 24 hours.** Where records are made or updated late or after the event, the fact must be stated as a 'Late Entry' in the record, and the date and time of the entry should be included”.

Recordings must be finalised by the author to ensure they cannot be altered.

**Clinical Notes**

Where practitioners record clinical notes to aid their thinking and processing of the direct work, these notes and reflections should be kept as a hard copy (handwritten or typed) within a folder that is stored safely and in line with the KCC record keeping policy. These notes must not be saved on a drive on the computer. The practitioner should record a case note on Liberi to summarise the content and key points from every contact with the child/adult/family.

**Clinical Supervision Notes**

Where practitioners receive clinical supervision, the expectation is that the clinical supervisor records a note of each clinical supervision session that summarises any key points discussed and any suggested decisions in relation to the direct work. This should be loaded onto Liberi by the clinical supervisor or, if they are external to KCC, provided to admin to load on Liberi **within one week**. If there are safeguarding concerns raised, or any significant issue that requires a management decision, it is the responsibility of the clinical supervisor to share this directly with the manager, or the next manager in the line if they are not available, **on the same day** of the discussion. The manager will record this discussion on Liberi. Records of ad-hoc supervision will be the responsibility of the supervisor to add to the system **within 48 hours** of the discussion.

**Case Management**

The manager will provide case management for all practitioners who receive clinical supervision, at a minimum of once every two months. The manager must be advised of the content of the clinical supervision sessions. It is the responsibility of the practitioner to bring the current clinical supervision records to their case management meetings with the manager. The manager is responsible for referencing that the clinical supervision notes were considered in the case management session and that the content of the session, including decisions and actions, are accurately recorded andLiberi updated **within one week**.

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