

Feasibility and effectiveness of implementing a clinical supervision exchange program in the Australian alcohol and other drugs sector

COURTNEY O'DONNELL^{1,2}, SEAN POPOVICH¹, NICOLE LEE³ & LEANNE HIDES^{2,4}

¹Queensland Network of Alcohol and Other Drug Agencies, Brisbane, Australia, ²School of Psychology, The University of Queensland, Brisbane, Australia, ³National Drug Research Institute, Curtin University, Perth, Australia, ⁴National Centre for Youth Substance Use Research, The University of Queensland, Brisbane, Australia

Presenter's email: courtney.odonnell@qnada.org.au

Introduction and Aims: Among alcohol and other drug (AOD) workers, access to effective clinical supervision is limited due to perceived barriers including the high cost of supervision and unavailability of skilled AOD-specific supervisors (1). This study sought to evaluate the effectiveness of a clinical supervision exchange program on increasing access to external, one-one one clinical supervision among AOD workers.

Design and Methods: Twenty frontline workers (supervisees) were randomly allocated to the supervision exchange (n=10) or supervision-as-usual (n=10) arms of the study. Participants in the supervision exchange arm of the study were matched with a supervisor (n=5) employed by another participating treatment service and received supervision for 10 months. All participants (supervisors and supervisees) were asked to complete a survey at baseline (0 months; pre-), and 5 months (mid-), 10 months (post-trial) and 15 months (follow-up) to measure number of supervision sessions received, satisfaction with supervision, burnout, turnover intention, self-efficacy and job satisfaction.

Results: A two-way repeated measures mixed ANOVA revealed a statistically significant interaction between treatment group and time on the number of individual external clinical supervision sessions received by participants $F(1,16) = 21.628, p < .0005, \text{partial } \eta^2 = .575$, such that participants in the supervision exchange group ($M=4.67, SD=1.87$) received more sessions than participants in the supervision-as-usual group ($M=.67, SD=1.32$) over time. No significant interaction effects of time and treatment group among any other variables were found.

Discussions and Conclusions: Findings suggest the supervision exchange program increased access to individual external clinical supervision among workers. 15-month follow up data will be available for inclusion in analyses prior to the APSAD 2022 conference.

Implications for Practice or Policy: Implementation of a clinical supervision exchange program is a potentially resource-effective strategy for increasing access to effective clinical supervision among workers in the AOD treatment sector.

Disclosure of Interest Statement: CO is supported by the Queensland Network of Alcohol and Other Drug Agencies (QNADA) to undertake her PhD. The project was funded by the Brisbane North Primary Health Network (BNPHN). The clinical supervision exchange model was developed by QNADA. NL is the founder and CEO of 360 Edge who led the co-development of AOD supervision training and resources with QNADA.

Reference List

1. O'Donnell C, Popovich S, Lee N, Hides L. Barriers and facilitators to accessing effective clinical supervision and the implementation of a clinical supervision exchange model in the Australian alcohol and other drugs sector. *Drug and Alcohol Review*. 2022.