**This was completed in written form by the supervisor.**

**SUPERVISOR TOPIC GUIDE**

**Personalised treatment packages for adults with learning disabilities who display aggression in community settings: a cluster randomised controlled trial (The PETAL intervention) – Feasibility phase**

**What motivated you to take part in the PETAL study as a supervisor?**

***Prompts***

* *Was the PETAL therapy what you anticipated when you agreed to join the study?*

Absolutely, there was a good amount of preparation and sharing of information prior to joining the study so, there weren’t any surprises.

* *What do you think about the PETAL therapy? Does it seem different to other therapies you have been involved with and/or supervised? How did you find using the PETAL manual?*

I don’t think the PETAL therapy had any ‘new’ ideas, as a lot of the topics covered in the manual would be covered in business as usual as part of an MDT approach, but what I did find helpful was the structure of the manualised approach. My assumption is that the business of usual approach would have covered the areas but would take a much longer time to complete.

**How did you find the supervisor training?**

*Prompts*

* *In what way did the training prepare you to be a supervisor in the PETAL study?*

It feels like this was such a long time ago, that I cannot remember the details of the training that I had to prepare me for the supervisor’s role.

* *Which aspect(s) of the training session was most helpful?*
* *What could have been delivered differently?*
* *Were there any issues that you encountered in the study that were not covered in the training?*
* *Is there anything else that would have been useful in the training?*

**How did you find delivering supervision in the PETAL study?**

* *How many therapists did you supervise? Was the frequency/duration of the supervision sessions sufficient?*

I supervised one PETAL therapist, we met weekly for one hour, or had ad hoc discussions as needed. This would be out usual supervision schedule.

* *Did the therapist/s need extra support from you outside of supervision sessions?*

My recollection is that we didn’t need to meet outside of supervision for any specific issue or discussion, we have regular peer catch ups and discussions throughout the day so would have discussed at these times.

* *What worked well in supervision sessions?*

Good communication between the PETAL Therapist and the research team, any queries or issues were shared, and we had responses to queries in a timely way.

* *What worked less well in supervision sessions?*
* *Are there any changes you would make to supervision?*

N/a

* *How different was delivering PETAL supervision to your usual clinical supervision sessions?*

I don’t think it was too dissimilar to our usual supervision.

* *Did you find the group supervisor meetings with the PETAL team useful?*

It was useful to understand how other services were navigating the progress, reassuring to know we were doing what was expected of us.

**What issues, if any, did you experience during the delivery of supervision?**

*Prompts:*

* *Did you have capacity to deliver supervision?*

Yes, I have allocated one hour per week for supervision with the clinician who was the PETAL therapist.

* *Did you have support from your wider team?*

Not in the direct role of supervisor, but I was co PI in the research alongside our consultant psychiatrist. I also had support from out R&D departments, and consultant clinical psychologist.

* *Were there any practical issues in arranging/delivering supervision?*

N/a

* *Were there any clinical issues that were specific to supervising the PETAL intervention?*

Not really, at the end of the intervention there was some clinical work which was outstanding, and a move between social care providers, we reallocated from within the team so there was a clear boundary role between the therapist and the clinician who would be continuing the work.

**What were the experiences of the therapists delivering the PETAL therapy?**

* How do you think the therapists you supervised found delivering the PETAL therapy?

I think they enjoyed being apart of the process, having additional skills and ways to approach the clinical work in a different way.

* What worked well or less well in the PETAL therapy sessions?
* Are there any improvements that could be made to the PETAL therapy to make it easier to implement in practice?

**Have you received any feedback on the PETAL therapy sessions e.g., from patients, carers?**

* What have they said?

I have heard from one parent, who praised the approach, they felt validated and listened to.

**Finally, is there anything I have not covered that you would like to talk about?**