

Resilience Based Clinical Supervision

Information for Commissioners

Promote compassion to ourselves... and to others...



October 2025

WHAT IS RBCS AND WHAT ARE THE BENEFITS?

Resilience-based Clinical Supervision (RBCS) is a form of restorative clinical supervision characterised by:

- Co-creating a safe space
- Integrating mindfulness-based stress-reduction exercises
- Focusing on the emotional systems motivating our response to a situation
- Considering the role of our internal critic in sustaining or underpinning our response to a situation
- Maintaining a compassionate flow to self and consequently to others

RBCS is underpinned by both compassion focused therapy and an ecological definition of resilience.

To find out more use the links below:

[FoNS Website](#)

[RBCS Animation](#)

[Resilience in
Nursing paper](#)

History of RBCS

(Stacey et al., 2017, Stacey et al., 2020)

RBCS was originally developed for the purpose of supporting people in their transition from student to registered nurse. The aim was to develop a forum that, as well as being supportive, would increase the individual's ability to respond positively to the emotional and physiological demands of their role. The potential outcomes leaned towards the restorative function of clinical supervision in that individuals felt supported by the process. This requires protected time and the commitment to and mobilisation of resources in order to impact ecological resilience and be sustainable. The outcomes were multilevel:

Individual:

- Use of mindfulness
- Distress tolerance skills
- Positive reframing skills, in particular using these to challenge the inner critic

Relational:

- Critical dialogue skills
- Development of supportive, restorative, reflective discussions
- Reflective discussion focused on the emotional consequences of practice

Organisational:

- Reinforces a culture which values staff and acknowledges the emotional consequences of their work

Further Evaluations

Health Education England Programme for Student and Newly Registered Nurses

(Foundation of Nursing Studies, 2021, 2022):

Both students and newly registered nurses identified connection and a safe space for sharing to be a positive experience. This provided peer support and a sense of feeling valued as individuals. Key learning was an increased self-awareness of emotions, reflection, mindfulness and using positive reframing to challenge the inner critic. These resulted in increased confidence, feeling calmer and a positive impact on their wellbeing.

Restorative Clinical Supervision in North Central London ICS

(Shaw et al., 2023)

- A programme of RBCS encourages self-care, and so increases feelings of mental wellbeing particularly when supported by the organisation
- Potentially £2,941 saved for every year's average sickness avoided (per nurse) £72,790 saved for every nurse retained

This programme supported the evidence of the beneficial effects of clinical supervision. This requires protected time for clinical supervision, organisational buy in from board to ward and ongoing support for facilitators of clinical supervision.

The effects of virtual RBCS for speech and language therapists

(Caron, 2024)

They found that participants who engaged in virtual RBCS sessions showed a decrease in burnout at the end of the study, with 5/6 experiencing a statistically significant reduction in burnout.

CHAMPION AND CASCADE MODEL

The aims of the Champion and Cascade RBCS programme are:

- To enable practice development nurses/facilitators, clinical educators etc. and those already familiar with models of clinical supervision or reflection (Champions), to develop the necessary knowledge, skills, and confidence to implement RBCS (Cascade) with nurses, nursing associates, allied health professionals, students and care workers, across organisations
- To support the development of a resilient workforce and organisation who are able to protect themselves from the emotional and physiological impacts of their roles and 'develop cognitive transformation practices, education and environmental support' (Stacey, 2018, p. 5)

Programmes are participatory and involve engagement from all participants in small groups. Sessions build on one another and therefore it is really important that participants are able to attend each session.

PROGRAMMES

FOR ORGANISATIONS

We offer this programme virtually for groups of up to 6 participants. The cost is £3,200 per cohort for a 13-hour facilitated programme. This is over 5 sessions over a 12-week period.

We are also able to offer this face to face at your organisation over a 2 day period at the cost of £4,200 for up to 10 individuals.

FOR INDIVIDUALS

From time to time we also run public 13-hour programmes for individuals to book onto. These cost £575 per person.

WHAT DOES IT INCLUDE?

This cost includes the learning experience as well as a digital pack, including a facilitator companion, and resources that can be used for implementation.

Each participant will receive a certificate on completion of the programme for 13 hours of participatory learning.

Following completion of the programme, participants will be invited to join the RBCS Facilitators Network which includes a monthly newsletter, workshop events and access to a private Facebook group.

Bespoke offers can also be arranged if required.

If you have any questions or wish to discuss commissioning a programme then please contact rbcsc@fons.org