**Background**

The Supervisory Relationship Measure (SRM) validly and reliably measures the supervisory relationship from the perspective of the supervisor in clinical psychology in the UK1.

**Aim**

To adapt and validate the SRM for use in Australian general practice training.

**Method**

Using a nominal group consensus method to adapt the original SRM instrument, the GP-SRM was piloted and rolled out to all GP Supervisors in the AGPT program using SurveyMonkey. 365 responses were received. Using SPSS 24, principal component analysis with direct oblimin rotation was conducted with all adapted SRM items followed by Procrustes transformation using Orthosim version 2.1. A quantitative/qualitative mixed method matrix methodology was used to analyse qualitative data.

Demographic data were analysed using SPSS for differences due to geographic location using Primary Health Care Index of Access and ABS remoteness measure (ASGC-Remoteness Area).

**Results**

Analysis of the GP-SRM data resulted in a best fit of 45 items on 3 subscales: safe base, supervisor commitment and registrar professionalism.

No differences were found in scores by location or by other demographic measures.

Qualitative data indicated that those who scored higher on the GP-SRM tend to have a more positive outlook related to their experience of supervision. The converse was true of those who scored less highly.

The results of the GP-SRM could inform CPD offerings to supervisors.

**Conclusion**

The GP-SRM is a valid, reliable instrument for measuring the supervisory relationship from the supervisor’s perspective in the Australian GP sector. It could assist with measuring supervisor satisfaction and inform the type of CPD that may assist the supervisor.

**Reference**

Pearce N, Beinart H, Clohessy A, Cooper M. Development and validation of the supervisory relationship measure: a self-report questionnaire for use with supervisors. British Journal of Clinical Psychology, 2013;52: 249–268.