**TEMPLATE RESIDENTIAL ONLY – Staff Supervision Record**

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| Name of Supervisee |  |
| Name of Supervisor |  |
| Date of Supervision |  |

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| **Brief of issues discussed** | **Actions agreed and by who and timefame** |
| **Reflection on practice**  Discussion on something that has gone well recently | |
|  |  |
| **Support/Self**   * Personal, external or organisational issues impacting on work * Health and Safety * Equality and Diversity needs * Annual Leave, TOIL, sickness | |
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| Review of notes and update on actions from last them | |
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| **Workload and performance management e.g**.   * Overall Workload * Key working & children discussed (cross reference to case initials, Case Supervision Records) * Performance issues | |
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| **Learning and Development eg**.   * Identifying learning and impact from: Audits, Observations, Training courses * Identifying individual learning needs, updating PDR * Team development issues * How has the learning impacted on your practice | |
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The above notes represent discussion as recorded by the Supervisor. If there are any errors and omissions, please raise at the next session

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| Signature of Supervisor |  |
| Signature of Supervisee |  |
| Date of next session |  |