

**Direct observation template**

One direct observation must be completed in each of the 5 years of the approval period. This must be completed by the AMHP’s supervisor. These should be planned in advance to enable the AMHP to evidence ongoing capability in the AMHP role

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| Name of AMHP |  |
| Name & Role of Observer |  |
| Date & Setting of Observation |  |

**Part 1: AMHP completes boxes on and two before observation**

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| **1. Brief background to observed contact** |
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| **2. Planning for the assessment** |
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 **AMHP completes box 3 after the observation**

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| **3. Reflections on the observed practice** |
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**AMHP completes box 4 after reading the observer’s report**

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| **4. Critical reflection and professional development**Bearing in mind the AMHP Key Competencies have you identified any specific areas for further development? How do you intend to address these? What support do you need? |
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| AMHP’s signature |  |
| Date |  |

**Part 2: Observer completes after the direct observation**

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| **5. Holistic assessment of the AMHP’s capability demonstrated in the direct observation of practice. Reference should be made to 5 AMHP Key Competence Areas and the Code of Practice Guiding Principles where relevant. You are not required to make a comment against each competence but can identify strengths and areas for development/concern (up to 500 words).** |
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 **Observer completes after the direct observation**

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| **6. Action plan following the direct observation (if applicable)**Have areas of development/learning needs been identified that should be addressed in the AMHP’s PDP? What action needs to be taken to address these? Are there any other outstanding issues? |
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| **7. Feedback from service users and carers (if applicable)** |
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| Observer’s signature |  |
| Date |  |