

UCMH Professional Supervision Record

Note: This table has been altered to fit vertically, but is normally in landscape with more space for filling in information.

Professional Supervision Record

Agenda & Record of Discussion

Instructions – Supervisor to fill in the first section, photocopy and fill out remaining sections at each session. At the end of the session the supervisor and supervisee sign the agreed record. A copy is stored according to Moreland Hall’s Professional Supervision Policy and Procedures.

Supervisee: _____ Supervisor: _____

Date of Supervision: ____/____/____

Key discussion points (includes a review of actions from last supervision, clinical knowledge & skill enhancement, professional development, reflective practice & support and accountability)	What’s working well?	What’s not working well?	Actions	By whom and when

Next Meeting: _____

This is an agreed record of the professional supervision session.

Supervisor’s signature: _____

Supervisee’s signature: _____ Date: _____