

**Cumberland Children and Family Wellbeing - Personal Supervision Template**

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| **Name of supervisor** |  |
| **Name of supervisee** |  |
| **Team** |  |
| **Date of supervision** |  |

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| **Agenda - What would you like to talk about today / use this supervision for? (*If there are discussions held about children / carers etc record here using ICS / EHM numbers)*** |
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| |  |  | | --- | --- | | **Actions from last supervision:** | **Progress of actions:** | |  |  | |
| **Let’s reflect - Pick a topic, event or child / family that you would like to have a reflective discussion about (Supervisee can record concise headline points using bullet points)** |
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| **Celebrating success: What is your key achievement or proud moment since our last supervision?** |
| |  |  | | --- | --- | | **Support: How are you? Is there anything you feel you need any support with? *(Consider work life, home life, emotional wellbeing, health, team, workload etc)*** | **Action**  (By whom/when) | |  |  | | **Development: What training, reading, research etc have you done recently that has aided your development? What did you learn from it?** | **Action**  (By whom/when) | |  |  | | **Development: Do you have any upcoming training planned? What are your current training and development needs? (Linked to appraisal)** | **Action**  (By whom/when) | |  |  | | **Development: Is there any learning from audits or complaints to discuss?** | **Action**  (By whom/when) | |  |  | | **Management: Manager feedback on areas of strength, areas to develop, performance management etc** | **Action**  (By whom/when) | |  |  | | **Management: Discuss annual leave, flexi, sickness, HR etc and any support required regarding time management.** | **Action**  (By whom/when) | |  |  | | **Mediation: Feedback - Is there anything that I could do differently as a manager that you feel would better support you / the team?** | **Action**  (By whom/when) | |  |  | | **Mediation: Do you have any ideas, suggestions or feedback you would like me to share within the wider organisation?** | **Action**  (By whom/when) | |  |  | |

**Any actions identified from the supervision (What needs to happen?)**

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| **What is the action?** | **Who will complete the action?** | **What date does the action need to be completed by?** |
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| **Read, agreed and signed by** | | | |
| Supervisee: |  | Date: |  |
| Supervisor: |  | Date: |  |