# Appendix 3 - Standard Welfare Supervision Form

**Personal Reflective/Welfare Supervision**

This form of supervision will explore the support and development functions of supervision offering an opportunity for the practitioner to reflect on their welfare as well as their personal and professional development. Welfare supervision should take place monthly unless role specifies otherwise. These sessions will be facilitated by the supervisee’s line manager. There is an expectation that both supervisor and supervisee practitioners prepare for the meeting. Any comments written by the Supervisor following the face-to-face meeting should be shared with the practitioner for approval before finalizing and storing on SharePoint.

**Please Note - all cases discussed should be recorded on the Case Discussion Supervision Form in LCS**

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| --- | --- |
| Name of Supervisee |  |
| Name of Supervisor |  |
| Date of this PR/W Supervision |  |
| Date of Last PR/W Supervision |  |
| Does the date between this Supervision and the last Supervision exceed the frequency which was agreed in your Supervision Contract? Is so, why? |  |

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| **How am I feeling?** |
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| **Supervisors Comments:** |
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| **How am I managing my work? (Include case discussions where applicable – use only LCS number; no personal details)** |
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| **Supervisors Comments:** |
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| **How am I managing my work/life balance? (Reference flexible working arrangements if relevant)** |
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| **Supervisors Comments:**   * Consider staff welfare/any stress related issues and support that can be offered |
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| **What support do I think would benefit me?** |
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| **Supervisors Comments:** |
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| **Am I accessing opportunities to professionally develop? Any feedback from training completed or research?** |
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| **Supervisors Comments**   * Supervisor to check SWs ME Learning account at least 1 x quarter * To consider induction requirements (as appropriate) * To confirm the practitioner has an up-to-date PDR on file (and if not, specify when this will be completed). If complete, review and consider longer term plans and professional goal setting. * Training requirements/training needs analysis/mandatory training * For NQSWs in the ASYE ongoing assessment and appraisal using the ASYE level of the Professional Capabilities Framework (PCF) * For Social Workers who have completed their ASYE; ongoing assessment and appraisal against PCF for experienced Social Workers to enable progression. |
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| **Do I need any time out? (Annual leave/Toil/Sickness management)** |
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| **Supervisors Comments** |
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| **Supervisor: Update on any actions from previous PR/W Supervision Session:** |
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| **Supervisor: Any actions for practitioner to take away from today’s Welfare Supervision Session:** *Please ensure action plans are SMART with clear timescales.* |
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**Signed Supervisor Date**

**Signed Supervisee Date**