

Supervision recording form

Supervisee Name:	Supervisor undertaking supervision:	Date:	Previous supervision date
<p>Progress on Actions: (from previous meeting)</p>			
<p>Workload: (amount; time; duties; targets etc)</p>			
<p>Action to be taken:</p>	<p>When:</p>	<p>By who:</p>	

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Concerns/team issues: (safeguarding, worker relationships; rota's; areas of work etc)		
Action to be taken:	When:	By who:
Nursery Performance: (occupancy rates; fee collection, debt management, safeguarding; budget; compliance, curriculum; marketing; new ideas etc)		
Action to be taken:	When:	By who:

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Training/Development :(any areas for development – agree what will be put in place and when)		
Action to be taken:	When:	By who:
Any other areas for discussion:		
Time Management: (toil/annual leave/general attendance)		
Number of days holiday outstanding for current leave year:		
Planned dates for leave in the coming months:		
Date of next meeting	Signed: (Employee)	Signed: (supervisor)

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Staff Suitability Declaration

This information is to be completed by all staff during their supervision process (including regular volunteers and students)

Please answer the questions and sign the declaration below to demonstrate that you are safe to work with children. If there are any aspects of the declaration that you are not able to meet, you should disclose this immediately to the manager/senior responsible for your line management.

Please circle yes or no against each bullet point:

- Have you been cautioned, subject to a court order, bound over, received a reprimand or warning or found guilty of committing any offence since the date of your most recent enhanced DBS disclosure? Yes/ No
- Have you been cautioned, subject to a court order, bound over, received a reprimand or warning or found guilty of committing any offence either before or during your employment at this setting? Yes/ No
- Are you 'Disqualified for Caring for Children': (to include) Yes/ No
- Have you committed any offences against a child? Yes/ No
- Have you committed any offences against an adult (e.g. rape, murder, indecent assault, actual bodily harm etc)? Yes/ No
- Have you been barred from working with children (DBS)? Yes/ No
- Are you living with someone who has been barred from working with children (DBS)? Yes/ No
- Are you living in the same household as someone who has been disqualified from working with children under the Childcare Act 2006? Yes/ No
- Have your own children been taken into care? Yes/ No
- Have/are your own children the subject of a child protection order? Yes/ No
- Has your name been placed on the DBS barring list? Yes/ No
- Do you have any medical conditions that could affect your ability to care for children? Yes/ No
- Are you taking any medication on a regular basis or any other substances? Yes/ No

If you have answered YES to any of the questions, please provide further information below:

I understand my responsibility to safeguard children and am aware that I must notify my manager of anything that may affect my suitability.

I will ensure I notify my line manager of any convictions, cautions, court orders, reprimands or warnings I may receive.

I am aware that if I am taking medication, I will inform my line management, and must keep the medication in a safe place, out of reach of children I will ensure I notify my manager if I experience any health concerns which could impact upon my ability to work with children

I give permission for you to contact any previous settings, local authority staff, the police, the DBS, or any medical professionals to share information about my suitability to care for children

Supervisee Signed:.....Date:.....

Supervisor Manager/ Area Manager Signature:.....Date:.....

Please record follow-on action taken, where relevant: Date action taken:..... Signed by

Signed by