**Kirklees Council ASSISTANT MANAGERS SUPERVISION**

**Supervision record**

**SUPERVISEE: SUPERVISOR:**

**Date/Time of Session:**

**AGENDA –**

|  |  |  |
| --- | --- | --- |
| **ISSUES DISCUSSED** | **SUMMARY OF DISCUSSION** | **ACTION** |
| **YP’s Placement Plan** |  |  |
| **Staffing Issues** |  |  |
| **Incidents reported under****Schedule 5** |  |  |
| **Personal feelings, concerns, stress** |  |  |
| **Performance Feedback** |  |  |
| **Development and Training (own / staff)** |  |  |
| **Guidance on new tasks** |  |  |
| **Inspection**  |  |  |
| **AOB**  |  |  |

**Date of next Supervision -**

**Signature: (Supervisee) (Supervisor)**

**Date:**