**Ongoing summary of supervision hours, supervised practice and cases (formative)**

**Term 1 2 (please keep a copy for your records and 1:1 tutorials)**

**Supervised practice (40 hours required by end of course)**

Total hours of supervised practice to date …………

**Cases seen to date** (3 required – two anxiety, one depression, including one working with parents)

**Case** = Patient seen from assessment to completion or termination of treatment, seen for a minimum of 5 sessions and entered into clinical log. 3 different problem types must have been seen**.**

**3 supervised cases (5 hrs of treatment required per case)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Case ID | Problem type | Supervisor | Supervision Hours | Date assessed using recording | Entered in clinical log |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |

**Name of Supervisor(s)**  **………………………………………………**

(A = confirmed accredited)

 **……………………………………………….**

**Overall total supervision (15 hours required by end of course) ……….**