



APPENDIX 7

Group Supervision – Personal Reflective Log

Use this form help you to reflect on the session and discuss with your supervisor in your next one-to-one supervision.

What have you learned?

How might this impact on your work?

Have you identified any learning and development needs?

Name	
Service Area/Team	
Group Supervision Date:	

How has the group supervision session impacted on your practice and/or improved your knowledge/understanding?

1.

2.

3.

Please detail any learning and development needs the session has highlighted and how this will be addressed:

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