

 Health Professions Council of South Africa Form 18 C SLH Supervisory Report	HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA PROFESSIONAL BOARD FOR SPEECH, LANGUAGE AND HEARING PROFESIONS REPORT BY SUPERVISOR FOLLOWING COMPLETION OF PERIOD OF SUPERVISED PRACTICE
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<i>Date of Erasure (For office use only)</i>			<i>Reason for erasure</i>		
<i>Approved</i>		<i>Not approved</i>		<i>Date of Restoration (For office use only)</i>	
APPLICANT					
Registration Number					
Title (Mr, Mrs, etc.), Initials and Surname					
Duration of Independent practice					
Prior/current Preliminary Inquiry or Professional conduct findings					
Postal Address					
Physical Address					
Telephone			Cell Number		
E-Mail Address					
CPD compliance activities					
Date of commencement of supervised practice			Date of termination of supervised practice		

SUMMARY OF APPLICANT'S ACTIVITIES AND EMPLOYMENT SINCE RESTORATION OF NAME TO THE REGISTER OF SUPERVISED PRACTICE					
Name of Institution	Activities performed	From		To	
		Month	Year	Month	Year

APPLICANTS KNOWLEDGE, SKILLS AND CAREER DEVELOPMENTS
The area/s they intend working in when they begin practising again
Their prior knowledge and skills
Any relevant skills and knowledge gained during the period of non-practice
Any relevant personal or career developments achieved during the period

SUPERVISING PRACTITIONER	
Title, Initials and Surname	
Registration number	
Independent practice duration	
Registered with the HPCSA since	
Current employment	
Physical address of Practice	
Work Telephone	
Cell Number	
Work E-Mail Address	
Fax Number	
Outline any prior or current Professional conduct or Preliminary Inquiry findings	Yes or no

SUPERVISORY REPORT TEMPLATE

Ensure that the supervision demonstrate competence and performance in all areas of scope of practice commensurate with registration requirements:

1. Details of

- a. Evidence based knowledge, skills and attitudes to professionally and ethically assess and manage clients requiring

- b. speech, language and swallowing services – for Speech therapists

- c. audiology and vestibular services – for Audiologists

- d. Observe health and safety regulations during the provision of clinical services

e. the plan that was devised and implemented to develop/foster clinical practice in all areas

f. The frequency and nature of the supervision process

g. Comments on the performance of the practitioner in relation to clinical areas and the general practice management skills

2. Recommendation: the supervisor must indicate

- a. whether the practitioner meets the competence and performance requirements for independent practice and registration in the desired category or

- b. whether a further period of supervised practice is recommended. Should a recommendation be for extended supervised period then it must be accompanied by a detailed motivation for the decision highlighting areas of concern.

AREA OF COMPETENCE:	Independent Practice Demonstrated?		
	YES	NO	COMMENTS
<i>The Supervisor to outline demonstrated areas of competence by the Supervisee</i>			
Participate in the assessment of own professional skills prior to and at end of the period of supervised practice			
Indicate areas of professional practice for which developmental support is required (which the mentor will concentrate on) and areas of strengths (which must be maintained /improved).			
Participate in drawing up a plan to:			
<ul style="list-style-type: none"> Develop professional competence and performance to meet the criteria for registration as an independent practitioner in the desired category 			
<ul style="list-style-type: none"> Facilitate supervision of clinical practice 			
Activities supervised include:			
<ul style="list-style-type: none"> Clinical practice 			
<ul style="list-style-type: none"> CPD activities 			
<ul style="list-style-type: none"> Administration / management responsibilities 			
Was there adherence to all operational policies, protocols and guidelines of the clinical practice site where supervised practice occurred			

AREA OF COMPETENCE: PROFESSIONAL BEHAVIOUR	Independent Practice Demonstrated?		
	YES	NO	COMMENTS
<i>The Supervisor to outline demonstrated areas of professional behaviour by the Supervisee</i>			
Are personal work habits in keeping with accepted standards?			
Utilises language and communication relevant to the context.			
Demonstrates awareness of diversity.			
Is mostly punctual and organised.			
Meets deadlines and ensures that appointments are kept.			
Manages work stress and pressure constructively.			
Utilises good time management thus ensuring productivity.			
Is structured and organised in approach.			
Demonstrates accountability.			
Knows personal limitations.			
Seeks support and advice from colleagues.			

AREA OF COMPETENCE: PROCESS OF INTERVENTION	Independent Practice Demonstrated?		
	YES	NO	COMMENTS
<i>Assessment:</i>			
Appropriate selection of assessment and screening procedures			
Comprehensive assessment of relevant components			
Analysis and interpretation of assessment findings			
Identification of assets and needs			
<i>Planning:</i>			
Identification of goals and possible outcomes			
Ability to set aims and objectives			
Consideration of evidence-based practice where relevant			
Incorporation of contextual and diversity issues into planning			
Selection of appropriate modalities and techniques			
<i>Intervention:</i>			
Client-centred practice			
Effective execution of Intervention			
Responsive to emerging needs, dynamics			
Monitors precautions; ensures safety & ethics			
Evaluating action and outcome:			
Monitors progress continuously			
Re-assessment as needed			
Reasoning applied with regard to effectiveness of interventions			
Modification of intervention as required			
Terminates / refers appropriately			
<i>Clinical Reasoning:</i>			
Reflection on action taken			
Theory is used as a foundation for reasoning			

AREA OF COMPETENCE: MANAGEMENT AND ADMINISTRATION	Independent Practice Demonstrated?		
	YES	NO	COMMENTS
Aware of management functions and would be able to contribute			
Able to plan ahead: e.g. programming, scheduling, budgeting, developing			
Completes relevant reports timeously, accurately and with attention to relevant detail			
Writes accurate and relevant reports			
Keeps accurate statistics			
Keep accurate and relevant records			
Ensures handover			

SUMMARY AND CONCLUSIONS	Independent Practice Advised?		
	YES	NO	COMMENTS
<i>Relationships & Teamwork</i>			
<i>Process of intervention</i>			
<i>Professional behaviour</i>			
<i>Management and administration</i>			

It is hereby confirmed that the applicant had completed work under my supervision for a period equivalent to at least six months (1000 hours) from20.....
to20.....

SUPERVISING PRACTITIONER				
Title, Initials and Surname				
Signature				
Date				
Recommend for approval	yes		no	
Comments/additional information				

SUPERVISEE	
Title, Initials and Surname	
Signature	
Date	
Comments	