Supervision report template

Supervision reports, completed by the supervisor in consultation with the supervisee, are to be submitted to the Australian Health Practitioner Regulation Agency for consideration by the Optometry Board of Australia:

- as stipulated by the Board on approval of a supervised practice plan and otherwise as required by the Board
- to propose or justify changes in supervision, including level of supervision
- with applications for renewal of registration by a supervisee, and
- on conclusion of supervised practice.

For information on reports and reporting requirements, please refer to the Board’s Supervision guidelines for optometrists

Supervision report details

1. Date of report:  

2. Name of supervisor:  

3. Name of supervisee:  

4. Reason for supervision (tick one):
   - Limited registration for postgraduate training or supervised practice
   - Limited registration for teaching or research
   - Returning to practice after an absence of greater than three years
   - Significant change to scope of practice
   - Condition or undertaking requiring supervision

5. Signature of supervisor:  

6. Signature of supervisee:  


6. Supervisee suitable for ongoing registration:  [ ] Yes  [ ] No

7. Level of supervision:  Level 1  2  3  4  (please circle level of supervision at time of report)

8. Anticipated supervision completion date:  

9. Changes recommended to the previously agreed supervised practice plan, if any, and reasons for changes:  
   (please attach separate sheets if necessary)

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Supervision report on progress

<table>
<thead>
<tr>
<th>Learning objectives listed in supervised practice plan</th>
<th>Progress in achieving goals</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1. Met</td>
</tr>
<tr>
<td></td>
<td>2. Not yet met but achievable</td>
</tr>
<tr>
<td></td>
<td>3. Not met and not achievable¹</td>
</tr>
</tbody>
</table>

¹ Supervisors should contact the Board as soon as practical if the learning objectives are not achievable
### Emerging issues or problems (if applicable) | Measures to address emerging issues or problems
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### Other comments

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10. **Date Supervision Commenced for this Supervision Plan/Level**

11. **Date Supervision Completed for this Supervision Plan/Level**