**Direct observation template**

**This form is intended for electronic completion.**

**The answer spaces will expand to accommodate text**.

|  |  |
| --- | --- |
| **NQSW** |  |
| **Name & role of observer** |  |
| **Date & setting of observation** |  |

**Section 1 – NQSW to complete**

**Complete boxes 1 and 2 before the observation**

|  |
| --- |
| **1. Brief background to observed contact between yourself and the service user** |
|  |

|  |
| --- |
| **2. Planning for intervention** |
|  |

**Complete boxes 3 and 4 after the observation**

|  |
| --- |
| **3. Brief description of the intervention** |
|  |

|  |
| --- |
| **4. Reflections on the observed practice** |
|  |

**Complete boxes 5 and 6 after reading the observer’s report**

|  |
| --- |
| **5. Critical reflection and professional development** |
|  |

|  |
| --- |
| **6. Comments and reflections on the feedback given by the observer** |
|  |

**NQSW’s signature: Date:**

**Direct observation, Section 2**

**Observer to complete after the direct observation**

**Please provide information to support your assessment of the direct observation; reference can be made to the nine domains of the professional capabilities framework where relevant. You are not required to make a comment against each domain but can identify strengths and areas for development/concern (including reference to individual capability statements where there are areas of concern).**

|  |
| --- |
| **Holistic assessment of the candidate’s capability demonstrated in the direct observation of practice (up to 300 words)** |
|  |

|  |
| --- |
| **Action plan following the direct observation (if applicable)**  **Have areas of development/learning needs been identified? What action needs to be taken to address these? Are they any other outstanding issues?** |
|  |

|  |
| --- |
| **Service user feedback** |
|  |

**Observer’s signature:**

**Date:**