Communication Log

Please use this log to record information shared and decisions made when assisting an employee who is off work or working at reduced capacity due to a mental health condition. Both the supervisor and employee should agree on what was discussed and agreed upon and sign that discussion entry. All information contained here is confidential.

# Information

|  |  |
| --- | --- |
| **Employee name:** | |
| **Supervisor / line manager name:** | |
| **Employee home / cell number (if off work):** | |
| **Start date (*yyyy-mm-dd*):** | **End date (*yyyy-mm-dd*):** |

# Communication log

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| **Date (*yyyy-mm-dd*):** | |
| **Discussion:** | |
| **Employee signature:** | **Supervisor signature:** |
| **Date (*yyyy-mm-dd*):** | |
| **Discussion:** | |
| **Employee signature:** | **Supervisor signature:** |
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***End of communication log***