



Supervised Visitation Continuance Observational Report

This template is used by Coffs Coast Contact Services staff to record ongoing observations for families in the Continuance phase of Monitored /Supervised visitation.

Section 1: Basic Information

☐ Scheduled Continuance Visit

☐ Low Risk Supervision ☐ 2nd Visit ☐ 3rd Visit ☐ 4th Visit _____

Child's Name:	
Parent/Carer Name:	
Date of Visit: Start Time - End Time -	
Location/Venue:	
Observer(s):Monitors	

Section 2: Observational Notes

Child's Presentation at Start of Visit:_____

Parental Interaction Quality:_____

Parent's Response to Child Cues/Needs:_____

Behavioural or Emotional Changes During
Visit:_____

Concerns or Incidents
Observed:_____

Section 3: Summary and Recommendations

Overall Observational Summary:

Progress Toward Visit
Goals:_____

Recommendations for Future Contact
Arrangements:_____

Supervision Monitor/ Observer Signature:

Name _____

Signature _____

Date: _____2026